



PRESS RELEASE

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Potassium Binder May Ease the Burden of Dietary Potassium Restriction in People on Dialysis

Highlights

- In a randomized trial of adults on hemodialysis with hyperkalemia, the potassium binder sodium zirconium cyclosilicate improved quality of life related to dietary potassium restriction and lowered serum potassium.
- The findings will be presented at American Society of Nephrology (ASN) Kidney Week 2026 October 22–25.

Denver, CO (October 22, 2026) — Dietary potassium restriction is important for managing hyperkalemia, or high blood potassium levels, in individuals on maintenance hemodialysis, but it imposes a substantial day-to-day burden. Results from a recent clinical trial indicate that adding the potassium binder sodium zirconium cyclosilicate (SZC) may help. The findings will be presented at ASN Kidney Week 2026 October 22–25.

In the multicenter, randomized, open-label, parallel-group trial, outpatients receiving thrice-weekly maintenance hemodialysis with pre-dialysis serum potassium of 5.5 to <6.5 mEq/L were assigned to SZC plus standardized nutritional counseling or nutritional counseling alone for 8 weeks.

In the main analysis including 183 patients, those who received SZC plus standardized nutrition counseling had a greater improvement in quality of life related to dietary potassium restriction than those who received nutrition counseling alone. SZC also lowered pre-dialysis serum potassium more effectively. No patient in the SZC group needed rescue treatment during the 8-week study, compared with 25 of 92 patients in the control group. In exploratory analyses, the investigators also saw an increase in fruit intake without an increase in total dietary potassium intake, as well as improvements in several areas of kidney disease-related quality of life. There were no serious treatment-related adverse events or deaths.

“SZC may provide an important patient-centered benefit beyond lowering serum potassium. When added to standardized nutritional counseling and regular potassium monitoring, SZC reduced the day-to-day burden of dietary potassium restriction while also providing better potassium control,” said corresponding author Hiromichi Wakui, MD,

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PhD, of Yokohama City University Graduate School of Medicine. “Hyperkalemia treatment should be judged not only by whether the potassium level falls, but also by whether treatment makes daily life less burdensome for patients.”

The investigators stressed that individualized dietary assessment, regular potassium monitoring, and attention to overall nutritional quality remain essential. When dietary restriction alone places a substantial burden on patients, potassium-binding therapy may support a safer and more patient-centered management strategy.

Study: “Sodium Zirconium Cyclosilicate and Quality of Life in Patients with Hyperkalemia on Hemodialysis: The Randomized Y-QOL Study”

About ASN Kidney Week

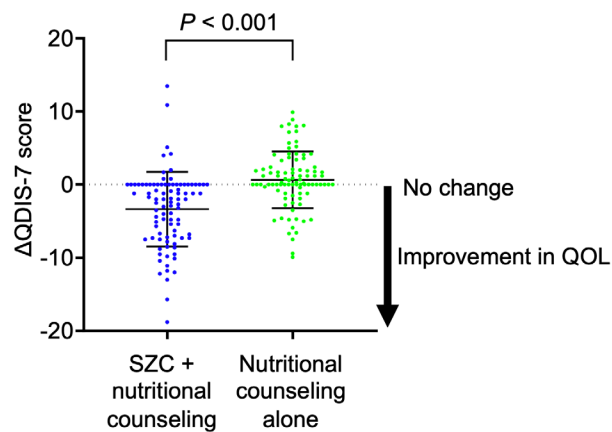
Join ASN and more than 12,000 other kidney professionals from across the globe at ASN Kidney Week 2026 in Denver, CO. The world's premier nephrology meeting, Kidney Week, provides participants with exciting and challenging opportunities to exchange knowledge, learn the latest scientific and medical advances, and listen to engaging and provocative discussions with leading experts in the field. Early programs begin on October 21, followed by the Annual Meeting from October 22-25. Follow the conversation at #KidneyWk.

About ASN

Since 1966, ASN has been leading the fight to prevent, treat, and cure kidney diseases throughout the world by educating health professionals and scientists, advancing research and innovation, communicating new knowledge and advocating for the highest quality care for patients. ASN has more than 20,000 members representing 138 countries. For more information, visit www.asn-online.org and follow us on [Facebook](#), [X](#), [LinkedIn](#), [Instagram](#), [Threads](#), and [Bluesky](#).

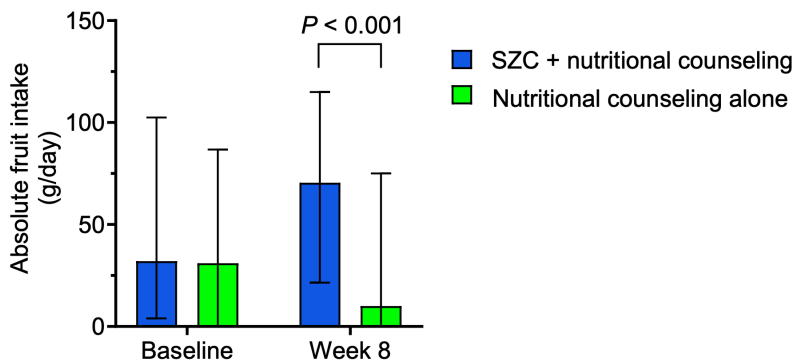
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Figure 1. Primary outcome: change in QDIS-7 score from baseline to week 8.



QDIS-7 measures how much dietary potassium restriction burdens daily life: a LOWER score means BETTER quality of life.

Figure 2. Fruit intake at baseline and week 8 by treatment group.



Bars represent median values and error bars indicate the interquartile range. Fruit intake was increased under weekly serum potassium monitoring and nutritional counseling in the SZC group. Serum potassium was lower in the SZC group at week 8 (4.6 vs 5.2 mEq/L).