

Resource Summary Report

Generated by [NIF](#) on Aug 6, 2026

NIDDK Central Repository

RRID:SCR_006542

Type: Tool

Proper Citation

NIDDK Central Repository (RRID:SCR_006542)

Resource Information

URL: <https://repository.niddk.nih.gov/home/>

Proper Citation: NIDDK Central Repository (RRID:SCR_006542)

Description: NIDDK Central Repositories are two separate contract funded components that work together to store data and samples from significant, NIDDK funded studies. First component is Biorepository that gathers, stores, and distributes biological samples from studies. Biorepository works with investigators in new and ongoing studies as realtime storage facility for archival samples. Second component is Data Repository that gathers, stores and distributes incremental or finished datasets from NIDDK funded studies Data Repository helps active data coordinating centers prepare databases and incremental datasets for archiving and for carrying out restricted queries of stored databases. Data Repository serves as Data Coordinating Center and website manager for NIDDK Central Repositories website.

Abbreviations: CDR, NIDDKCDR

Synonyms: NIDDK Central Repository, National Institute of Diabetes and Digestive and Kidney Diseases Central Repository, NIDDKCentral Repositories

Resource Type: biospecimen repository, data or information resource, data repository, database, storage service resource, service resource, material storage repository

Defining Citation: [PMID:23396299](#), [PMID:21959867](#), [PMID:16595012](#)

Keywords: clinical supply resource, data, clinical, sample sharing, genotyping, genotype, phenotype, genetic analysis, data sharing, genetics, serum, plasma, stool, urine, dna, red blood cell, buffy coat, tissue, immortalized cell line, cell line, data set, digestive organ, kidney, diabetes, kidney disease, digestive disease, genome-wide association study, sequencing, FASEB list

Funding: NIDDK

Availability: Restricted

Resource Name: NIDDK Central Repository

Resource ID: SCR_006542

Alternate IDs: nlx_152673, r3d100010377

Alternate URLs: <https://doi.org/10.17616/R3WP48>

Old URLs: <https://www.niddkrepository.org>,

Record Creation Time: 20220129T080236+0000

Record Last Update: 20260806T054430+0000

Ratings and Alerts

No rating or validation information has been found for NIDDK Central Repository.

No alerts have been found for NIDDK Central Repository.

Data and Source Information

Source: [SciCrunch Registry](#)

Usage and Citation Metrics

We found 85 mentions in open access literature.

Listed below are recent publications. The full list is available at [NIF](#) .

Onengut-Gumuscu S, et al. (2025) Type 1 Diabetes Genetics Consortium. The Journal of clinical endocrinology and metabolism, 110(6), 1505.

Naliboff BD, et al. (2025) Relationship of Sex and Diagnosis With Symptoms and Illness Impact in Urologic Chronic Pelvic Pain; A Mapp Network Analysis. Neurourology and urodynamics, 44(2), 400.

Hsu SP, et al. (2025) Employing urinary biomarkers in predicting renal recovery three months after in-hospital acute kidney injury. Renal failure, 47(1), 2522975.

Domagalski MJ, et al. (2025) Preparing clinical research data for artificial intelligence readiness: insights from the National Institute of Diabetes and Digestive and Kidney Diseases data centric challenge. Journal of the American Medical Informatics Association : JAMIA, 32(10), 1609.

Zhao LP, et al. (2025) Profiling associations of interactive ligand-receptors (HLA class I and KIR gene products) with the progression to type 1 diabetes among seroconverted participants. Diabetologia, 68(12), 2743.

Luckett AM, et al. (2025) Genetic risk in extremely early onset type 1 diabetes. medRxiv : the preprint server for health sciences.

Venkatesh KK, et al. (2025) Hypertensive disorders of pregnancy and gestational diabetes mellitus and predicted risk of maternal cardiovascular disease 10-14???years after delivery: A prospective cohort. Diabetic medicine : a journal of the British Diabetic Association, 42(5), e15516.

Zhao Y, et al. (2025) Joint Modeling of Longitudinal Biomarker and Survival Outcomes with the Presence of Competing Risk in Nested Case-Control Studies with Application to the TEDDY Microbiome Dataset. bioRxiv : the preprint server for biology.

Bramer LM, et al. (2025) Data from a multi-year targeted proteomics study of a longitudinal birth cohort of type 1 diabetes. Scientific data, 12(1), 112.

Sen CK, et al. (2025) High Transepidermal Water Loss at the Site of Wound Closure Is Associated With Increased Recurrence of Diabetic Foot Ulcers: The NIDDK Diabetic Foot Consortium TEWL Study. Diabetes care, 48(7), 1233.

Hsu SP, et al. (2024) Employing urinary biomarkers to infer the absence of acute kidney disease in outpatients with a single serum creatinine measurement. Renal failure, 46(2), 2427161.

Darshi M, et al. (2024) Glycolytic lactate in diabetic kidney disease. JCI insight, 9(11).

Zhao LP, et al. (2024) Progression to type 1 diabetes in the DPT-1 and TN07 clinical trials is critically associated with specific residues in HLA-DQA1-B1 heterodimers. Diabetologia, 67(11), 2481.

Nettey OS, et al. (2024) Validation of Distinct Bladder Pain Phenotypes Utilizing the MAPP Research Network Cohort. International urogynecology journal, 35(3), 637.

Zhou B, et al. (2024) An integrated strain-level analytic pipeline utilizing longitudinal metagenomic data. Microbiology spectrum, 12(11), e0143124.

Seaquist ER, et al. (2024) Glycemia reduction in type 2 diabetes-Hypoglycemia outcomes: A randomized clinical trial. PloS one, 19(11), e0309907.

Koch KL, et al. (2024) Low Vitamin D Levels in Patients with Symptoms of Gastroparesis: Relationships with Nausea and Vomiting, Gastric Emptying and Gastric Myoelectrical Activity. Digestive diseases and sciences, 69(8), 2904.

Truta B, et al. (2023) Inflammatory Bowel Diseases Before and After 1990. Gastro hep advances, 2(1), 22.

Sanyal AJ, et al. (2023) Diagnostic performance of circulating biomarkers for non-alcoholic steatohepatitis. Nature medicine, 29(10), 2656.

Ylescupidez A, et al. (2023) A standardized metric to enhance clinical trial design and outcome interpretation in type 1 diabetes. Nature communications, 14(1), 7214.