

# Timing of Cardiovascular and Kidney Benefits with Finerenone in Heart Failure and Chronic Kidney Disease with Type 2 Diabetes

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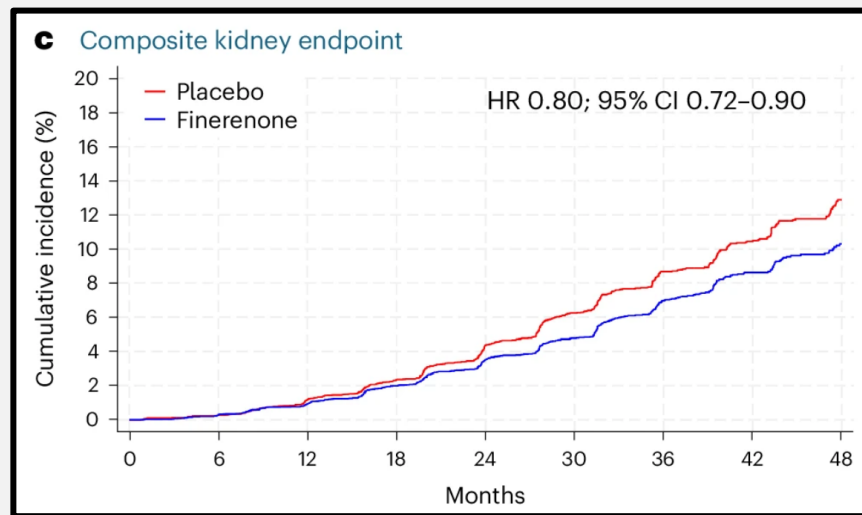
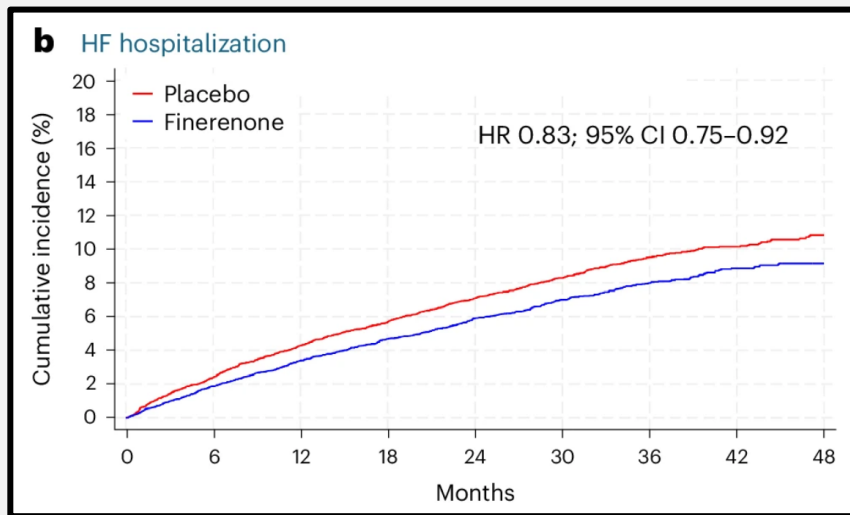


## FINANCIAL DISCLOSURE

- JWO reports research grant support from the National Institutes of Health (5T32HL007604-39 and L30HL175757) and has served on advisory boards or had speaker engagements with Corcept Therapeutics
- The FIDELIO-DKD, FIGARO-DKD, and FINEARTS-HF trials were sponsored by Bayer AG

## BACKGROUND

- Finerenone has been shown to reduce adverse cardiovascular and kidney outcomes across a wide spectrum of CKM disease
- FINE-HEART (FIDELIO-DKD, FIGARO-DKD, and FINEARTS-HF):



## OBJECTIVE

- Improved understanding of the estimated relative timing of these multiorgan benefits may enhance personalized decision-making around implementation of finerenone in routine care.

***In this participant-level analysis of 3 global outcomes trials, we estimated the relative timing of cardiovascular and kidney protection with finerenone vs. placebo in persons with HF or CKD with type 2 diabetes.***

# STUDY POPULATION

PROSPERO  
CRD42024570467



n=18,991



- Recruitment: 2015-2018
- Population: CKD and type 2 diabetes, with albuminuria
- Primary outcome: kidney failure, sustained eGFR decrease  $\geq 40\%$ , or renal death



- Recruitment: 2015-2018
- Population: CKD and type 2 diabetes, with albuminuria
- Primary outcome: CV death, non-fatal MI, non-fatal stroke, or HF hospitalization



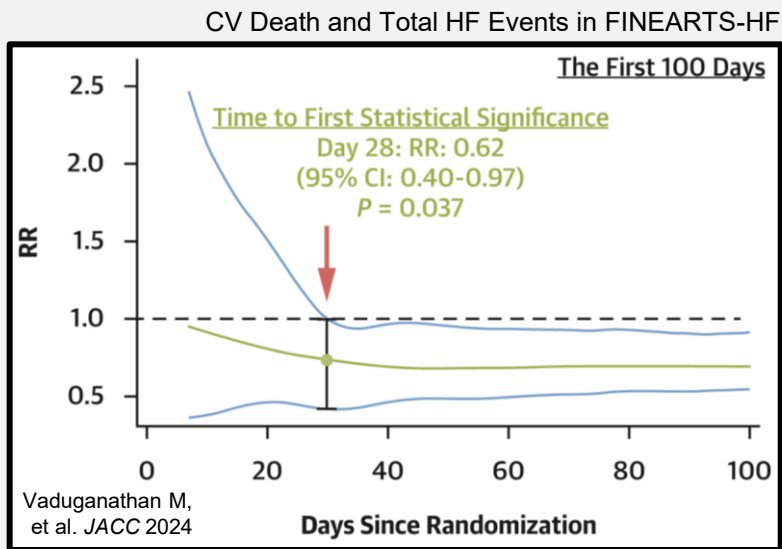
- Recruitment: 2020-2023
- Population: HFmrEF/HFpEF, with or without diabetes, with or without CKD
- Primary outcome: CV death and total HF events

*Clinical outcomes were examined separately in 1) FIDELIO-DKD and FIGARO-DKD; and 2) FINEARTS-HF*

# METHODS

## 1. Time to onset of cardiovascular and kidney benefit with finerenone

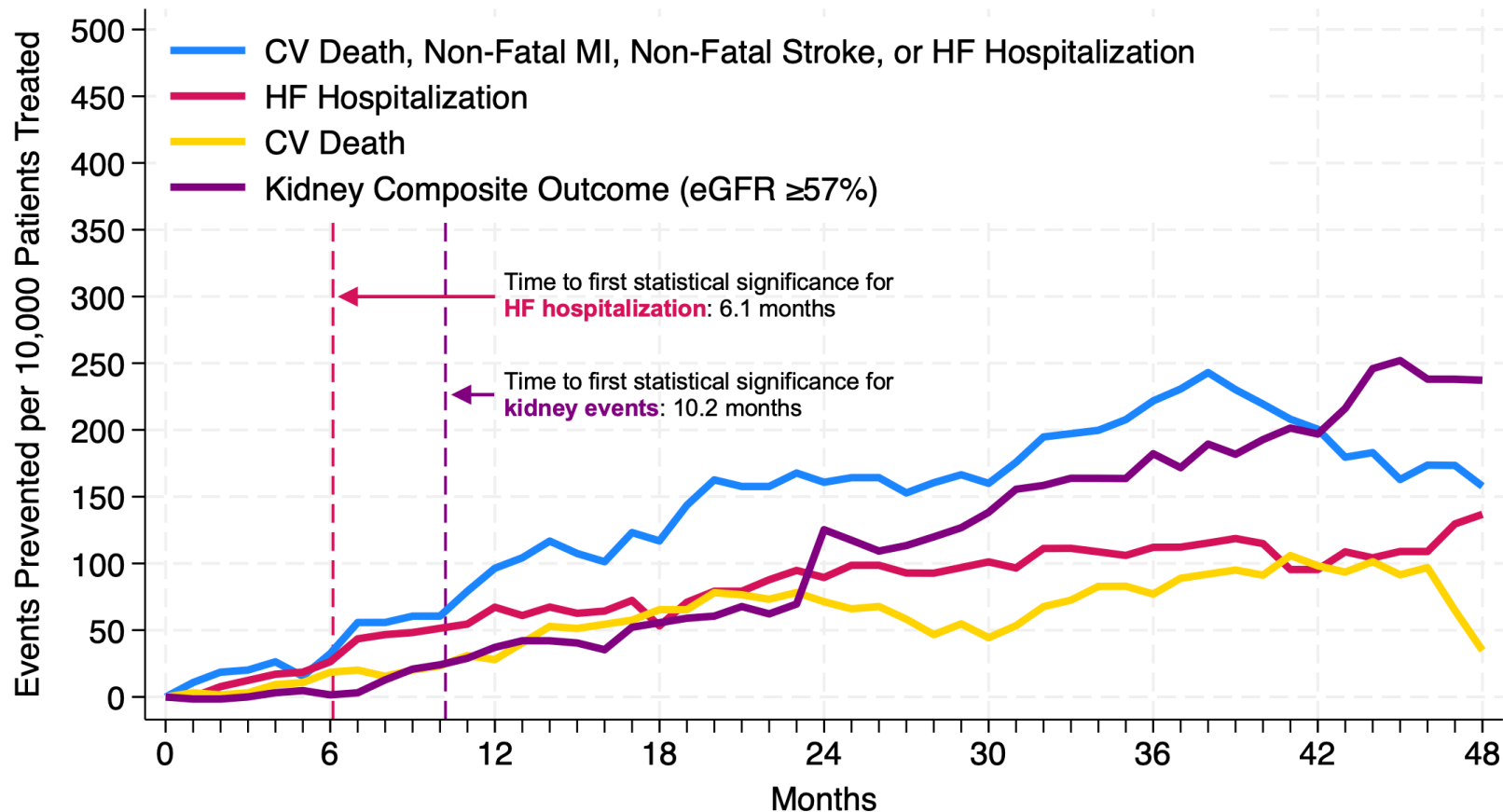
- Iterative estimation of HRs and 95% CI for selected time-to-first endpoints using truncated data at each day post-randomization



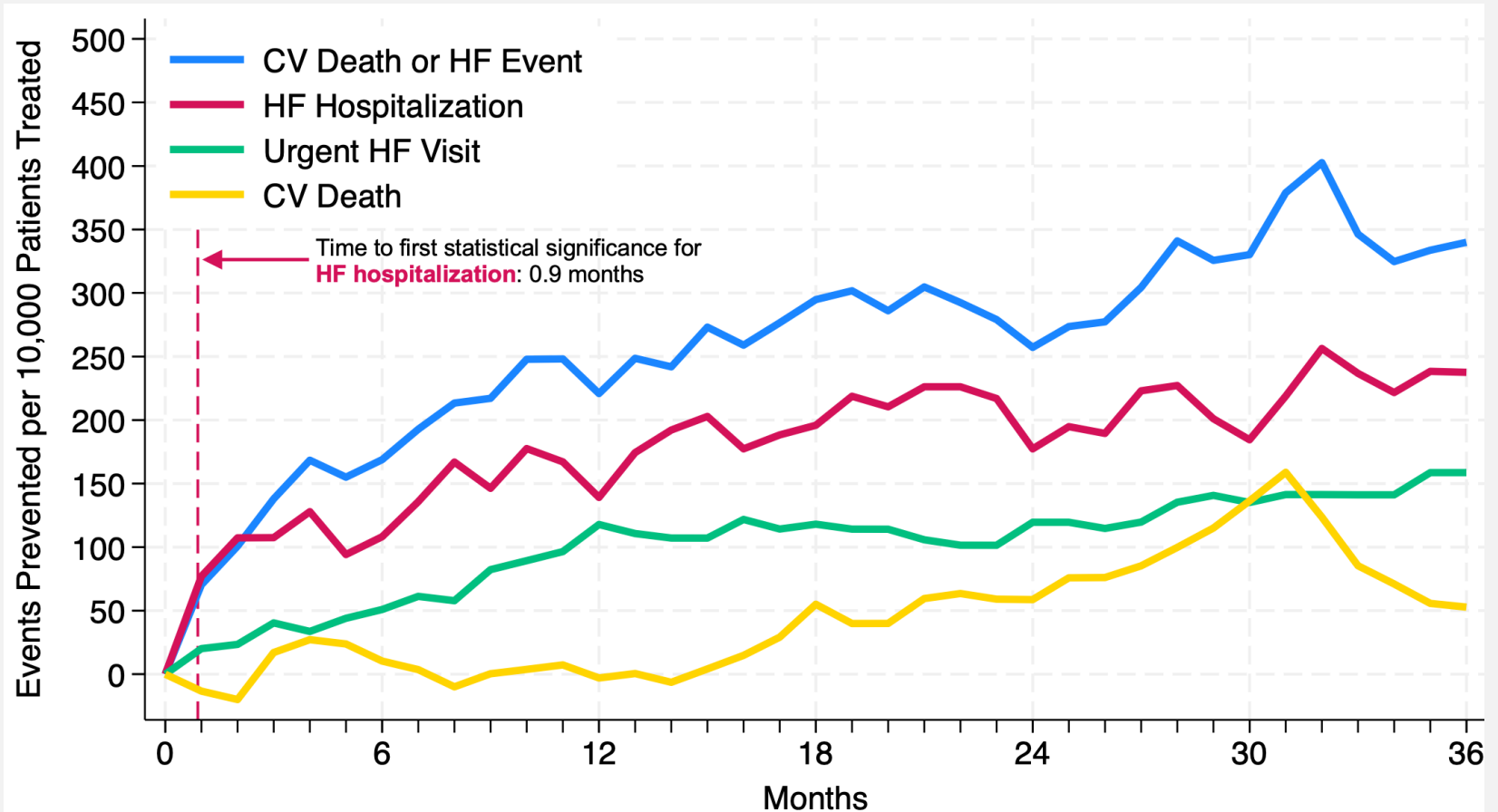
## 2. Accrual of cardiovascular and kidney benefits with finerenone

- Estimated the cumulative number of events prevented at different timepoints (per 10,000 treated participants)
- Selected key outcomes
  - Cardiovascular
    - Cardiovascular (CV) death
    - HF events
  - Kidney
    - Composite of kidney failure, sustained  $\geq 57\%$  decrease in eGFR, or kidney-related death

# TIMING OF CLINICAL EVENTS PREVENTED WITH FINERENONE IN FIDELITY



# TIMING OF CLINICAL EVENTS PREVENTED WITH FINERENONE IN FINEARTS-HF





## LIMITATIONS & CONCLUSIONS

- **Limitations:**

- Time-to-first statistical significance may be influenced by sample size and event rates
- Multiple factors, such as longitudinal access and adherence, may impact realization of these trial-level estimates of cumulative benefit in routine care

- **Conclusion**

*These findings underscore the high short-term risks of HF events in persons with CKM conditions, which are modifiable with finerenone. When used in CKD management, finerenone prevents cardiovascular events even prior to modifying longer-term risks of CKD progression.*