

Learn more about KERENDIA: At the heart of reducing CV risks in adult patients with CKD and T2D (PP-KER-US-2850-2).

	Event Description:	This presentation follows Mary and George, two hypothetical type 2 diabetes (T2D) patients whose cardiovascular (CV) risks escalate as their chronic kidney disease (CKD) progresses. This program will educate on the KDIGO CV mortality risk heat map and the importance of reducing the risk of CV death, nonfatal MI, and hospitalization for heart failure (HHF) in patients with CKD associated with T2D, while introducing the indication for KERENDIA in reducing the risk of HF events and CV deaths in patients with HF with LVEF $\geq 40\%$.
	Date:	10/15/25
	Time:	6:30 PM (GMT-07:00) Mountain Standard Time (America/Phoenix)
	Venue:	Delta Hotel
	Address:	2301 Colonial Drive Helena, MT 59601
	Program Number:	BAY0025506
	Bayer Healthcare Representative:	Donald Slovarp Portfolio Sales Consultant donald.slovarp@bayer.com (973) 845-5226
	Bayer Presenter:	Michael Shannon MD Endocrinology MultiCare Connected Care and PSW Chief Medical Officer

If you would like to attend, please RSVP to: Donald Slovarp at donald.slovarp@bayer.com.

Attention Attendees: This program is being provided for the education of healthcare practitioners who diagnose or treat the conditions for which this Bayer product is indicated and/or prescribe, recommend, or support the use of this Bayer product. Pursuant to the PhRMA Code, additional guests such as friends, significant others, or family members are not appropriate speaker program attendees. If you have any questions about attendance for the program, please contact the Bayer representative responsible for the program.

Please Note: To maintain the educational focus of the event, alcohol will not be provided.

INDICATIONS:

KERENDIA (finerenone) is indicated to reduce the risk of:

- sustained estimated glomerular filtration rate (eGFR) decline, end-stage kidney disease, cardiovascular death, non-fatal myocardial infarction, and hospitalization for heart failure in adult patients with chronic kidney disease (CKD) associated with type 2 diabetes (T2D) (10mg, 20mg tablets)
- cardiovascular death, hospitalization for heart failure, and urgent heart failure visits in adult patients with heart failure with left ventricular ejection fraction (HF LVEF) $\geq 40\%$ (10mg, 20mg, 40mg tablets)

IMPORTANT SAFETY INFORMATION

CONTRAINDICATIONS:

- Hypersensitivity to any component of this product
- Concomitant use with strong CYP3A4 inhibitors
- Patients with adrenal insufficiency

Please see additional Important Safety Information on next page and accompanying full Prescribing Information.

IMPORTANT SAFETY INFORMATION (continued)**WARNINGS AND PRECAUTIONS:**

- **Hyperkalemia:** KERENDIA can cause hyperkalemia. The risk for developing hyperkalemia increases with decreasing kidney function and is greater in patients with higher baseline potassium levels or other risk factors for hyperkalemia

Measure serum potassium and eGFR in all patients before initiation of treatment with KERENDIA and dose accordingly. Do not initiate KERENDIA if serum potassium is >5 mEq/L. Measure serum potassium periodically during treatment with KERENDIA and adjust dose accordingly. More frequent monitoring may be necessary for patients at risk for hyperkalemia, including those on concomitant medications that impair potassium excretion or increase serum potassium.

- **Worsening of Renal Function in Patients with Heart Failure:** KERENDIA can cause worsening of renal function in patients with heart failure. Rarely, severe events associated with worsening renal function, including events requiring hospitalization, have been observed

Measure eGFR in all patients before initiation of treatment or with dose titration of KERENDIA and dose accordingly. Initiation of KERENDIA in patients with heart failure and an eGFR <25 mL/min/1.73 m² is not recommended. Measure eGFR periodically during maintenance treatment with KERENDIA in patients with heart failure. Consider delaying up-titration or interrupting treatment with KERENDIA in patients who develop clinically significant worsening of renal function

MOST COMMON ADVERSE REACTIONS:

- **CKD associated with T2D:** From the pooled data of FIDELIO-DKD and FIGARO-DKD, the adverse reactions reported in $\geq 1\%$ of patients on KERENDIA and more frequently than placebo were hyperkalemia (14% vs 6.9%), hypotension (4.6% vs 3%), and hyponatremia (1.3% vs 0.7%).
- **HF LVEF $\geq 40\%$:** From FINEARTS-HF, the adverse reactions reported in $\geq 1\%$ of patients on KERENDIA and more frequently than placebo were hyperkalemia (9.7% vs 4.2%), hypotension (7.6% vs 4.7%), and hyponatremia (1.9% vs 0.9%). Events related to worsening renal function were reported more frequently in the KERENDIA group (18%) compared with placebo (12%).

DRUG INTERACTIONS:

- **Strong CYP3A4 Inhibitors:** Concomitant use of KERENDIA with strong CYP3A4 inhibitors is contraindicated. Avoid concomitant intake of grapefruit or grapefruit juice.
- **Moderate and Weak CYP3A4 Inhibitors:** Monitor serum potassium during drug initiation or dosage adjustment of either KERENDIA or the moderate or weak CYP3A4 inhibitor, and adjust KERENDIA dosage as appropriate.
- **Strong and Moderate CYP3A4 Inducers:** Avoid concomitant use of KERENDIA with strong or moderate CYP3A4 inducers.
- **Sensitive CYP2C8 Substrates at KERENDIA 40mg:** Monitor patients more frequently for adverse reactions caused by sensitive CYP2C8 substrates if KERENDIA 40mg is co-administered with such substrates, since minimal concentration changes may lead to serious adverse reactions.

USE IN SPECIFIC POPULATIONS:

- **Lactation:** Avoid breastfeeding during treatment with KERENDIA and for 1 day after treatment.
- **Hepatic Impairment:** Avoid use of KERENDIA in patients with severe hepatic impairment (Child Pugh C) and consider additional serum potassium monitoring with moderate hepatic impairment (Child Pugh B).

Please see accompanying full Prescribing Information for KERENDIA.

You are encouraged to report side effects or quality complaints of products to the FDA by visiting www.fda.gov/medwatch or calling 1-800-FDA-1088. For Bayer products, you can report these directly to Bayer at <https://www.bayer.com/en/products/report-a-side-effect>.

Regards,
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