

Finerenone for treating chronic kidney disease in people with type 2 diabetes.

Indications

eGFR 25 – 60mls/min *AND* uACR > 3mg/mmol

added to ACE-i/ARB and SGLT2i or

added to ACE-i/ARB, if SGLT2i contraindicated or not tolerated

Contraindications

Allergy to mineralocorticoid antagonist.

Addison's disease.

Pregnancy or Breast feeding

Concomitant treatment with strong CYP3A4 inhibitors e.g., clarithromycin

Monitoring

Repeat potassium within 28 days after initiation or a dose increase.

Discontinue if eGFR <15mls/min.

Dosing

Start at 10mg od, increasing to 20mg od, *IF* serum potassium <5 mmol/L.

Suspend Finerenone *IF* potassium ≥ 5.5 mmol/L, restarting at 10mg when <5.0.

eGFR, estimated glomerular filtration rate; od, once daily; uACR urine microalbumin ratio

v6 Hinchliffe/Logan, STSFT, Jan 2024

Approved by NENC Medicines Subcommittee Feb 2024

Review date Feb 2026