Getting Started with Kerendia®▼ (finerenone)

Discover how treatment with Kerendia and lifestyle changes can help delay the worsening of kidney disease

This booklet is intended for adult patients with chronic kidney disease (stage 3 and 4 with albuminuria) associated with type 2 diabetes who have been prescribed Kerendia by their doctor

▼ This medicine is subject to additional monitoring. This will allow quick identification of new safety information. If you get any side effects, talk to your doctor, pharmacist or nurse. This includes any possible side effects not listed in the package leaflet. You can also report side effects directly via the Yellow Card Scheme at https://yellowcard.mhra.gov.uk/ or search for MHRA Yellow Card in Google Play or Apple App Store. By reporting side effects you can help provide more information on the safety of this medicine.

This booklet has been developed and fully funded by Bayer to support patients who have been prescribed Kerendia

Please always refer to the Kerendia Patient Information Leaflet provided with your medication. If you have further questions about Kerendia, please speak to your healthcare professional.

How Kerendia can protect the kidneys

In adults with chronic kidney disease (CKD, stage 3 and 4 with albuminuria) associated with type 2 diabetes (T2D), Kerendia is a once-daily tablet shown to slow the progression of kidney disease

How it works

As you may know, diabetes and high blood pressure are risk factors for kidney disease. While diabetes and blood pressure medications work to control glucose levels and high blood pressure, respectively, Kerendia is a medication that works directly on the kidneys.

Having T2D can contribute to the overactivation of certain proteins called mineralocorticoid receptors (MRs). When the MR is overactivated it may cause kidney damage which can worsen kidney function. If untreated, patients may eventually need dialysis or a kidney transplant. Kerendia blocks these MRs and prevents them from being overactive.

Taking Kerendia with other medications for diabetes, high blood pressure and CKD can help improve kidney health because it helps to protect the kidneys. However, not all blood pressure medications can be used with Kerendia. Talk to your doctor if you are also taking blood pressure medication and they will assess the best course of action for you.

Taking your medication

- Your medication is a tablet you take once a day —with or without food—unless advised differently by your healthcare provider (HCP)

- If you are unable to swallow whole tablets, crush your medication and mix it with water or soft foods such as apple sauce, and be sure to use it immediately

- Avoid eating grapefruit or drinking grapefruit juice for as long as you are being treated with Kerendia. They will interfere with how your body breaks down your medication

If you miss a dose (or forget to take your tablet), don't worry. Just take your prescribed dose as soon as you remember, but only on the same day as the missed dose. Do not take two doses on the same day.

It's important to stay on treatment

Your healthcare professional (HCP) has prescribed this medication for you as it blocks the action of certain hormones (mineralocorticoids) that can damage your kidneys. It's very important that you stay on your treatment as prescribed. Here's why:

1. Because CKD is a progressive disease, it may continue to get worse without treatment.

2. **IMPORTANT**
You may not feel any different while taking the medication, but this does not mean that it is not working. Please continue to take your medication as prescribed by your health care professional.

Try these tips to help you take your medicine as directed by your HCP:

- Consider taking Kerendia at the same time as another activity in your daily routine, such as after brushing your teeth
- Set an alarm to help you remember to take your medication at the same time each day
- Mark it down in a notebook that you've taken your medicine that day

Understanding common side effects

The most common side effects seen in people receiving Kerendia were:

- Potassium levels in the blood are higher than normal (Hyperkalaemia)
  - See page 12 for more information about foods that contain potassium. Please talk to your HCP for advice on your diet
- Blood pressure is lower than normal (Hypotension)
- Sodium levels in the blood are lower than normal (Hyponatraemia)
- Uric acid levels in the blood are higher than normal (Hyperuricaemia)
- Itchy skin (Pruritus)
- Decrease in how well the kidneys filter blood (Glomerular filtration rate decreased)

For a full list of side effects, please see the patient information leaflet. Tell your HCP if you have any side effects or concerns that bother you or do not go away.

Before initiating and while taking Kerendia, your HCP will monitor your potassium levels with a blood test to check for high potassium. They will advise you about how often you should have your blood tested.

Important reminder

It is very important to talk to your HCP before you start any new medicines, as Kerendia and certain other medicines can interact, causing serious side effects. This includes prescription and non-prescription medicines, vitamins, and herbal supplements.

Ways to take an active role in managing your chronic kidney disease

You can take steps to slow down your chronic kidney disease (CKD) even if you cannot reverse it. You can be proactive and make lifestyle changes that improve your overall health and well-being. Here are some things to consider that may help you protect your kidneys:

Manage medical conditions

- Meet your blood sugar goals—maintaining optimal blood sugar can help protect your kidneys

- Try and keep your blood pressure under control as high blood pressure is a cause and a complication of CKD.

- Always take your medicines exactly as your healthcare provider (HCP) has told you

NOTE: This is only general lifestyle advice. Please talk to your HCP before engaging in any physical activity or changing your diet. Always follow the advice of your HCP.

Lifestyle changes can make a difference

- Exercise at least 30 minutes a day most days of the week to help reach your blood pressure and blood sugar goals

- Work with a dietitian to develop a healthy meal plan so that you know which foods you should eat and which you should avoid
  - Talk to your HCP about how to manage your diet with foods that contain potassium. See page 12 to 13 for more detailed information
  - Manage your fluid intake as advised by your HCP, because damaged kidneys cannot remove extra fluid as well as they should
  - Always talk to your HCP about proper fluid intake and how to choose appropriate foods carefully, because your needs may change over the course of your disease

- Maintain a healthy weight—being overweight is linked to high blood pressure, heart disease, and CKD

- Avoid the overuse of nonsteroidal anti-inflammatory drugs (NSAIDs) such as ibuprofen and naproxen, which may damage your kidneys

- Consider quitting if you smoke

Diagnosing the 5 stages of chronic kidney disease (CKD)

There are two tests needed to assess and monitor your kidney health.

UACR (urine albumin-to-creatinine ratio) is a urine test that detects how much albumin has leaked into the urine. Albumin is a type of protein found in the blood. Healthy kidneys do not let albumin pass into the urine, but a damaged kidney can let some albumin pass into the urine.

- Less than 3 mg/mmol is considered normal
- Between 3 mg/mmol to 30 mg/mmol is considered high
- Above 30 mg/mmol is considered very high

eGFR (estimated glomerular filtration rate) is a blood test that measures how well your kidneys filter waste from your blood.

- Above or equal to 90 is normal or high
- Between 60–89 is mildly decreased
- Between 45–59 is mildly to moderately decreased
- Between 30–44 is moderately to severely decreased
- Between 15–29 is severely decreased
- Less that 15 is considered kidney failure

These tests will allow for kidney care that can help slow the progression of CKD

Reference
1. UK Kidney Association (UUKA) CKD Stages. Available at: https://www.ukkidney.org/health-professionals/information-resources/uk-eckd-guide

Accessed October 2025.

Stage 1

- Normal kidney function, with no obvious symptoms. Increased protein in urine (albuminuria) is possible, but not always present

Stage 2

- Kidney function is working well and the kidneys filtering of blood is normal (estimated glomerular filtration rate is normal) but there can be signs of mild kidney damage, such asprotein in the urine or physical damage to the kidney

Stage 3

- Mild to moderately decreased kidney function, which leads to waste buildup in your body. More symptoms are likely, such as swelling in your hands and feet (oedema) or back pain. Increased protein in urine is likely, but not always present

Stage 4

- Kidney function is moderately or severely reduced and other health complications are likely, such as bone disease or anaemia (low number of red blood cells). Increased protein in urine is very likely

Stage 5

- You have, or are very close to, complete kidney failure, which means your kidneys are unable to clear the blood from waste products. At this stage, you are very likely to require dialysis. Highly increased protein in urine is very likely

Examples of foods that contain potassium

Before making any dietary changes please consult with your healthcare professional.

Potassium is found in many processed foods and drinks; including crisps, chocolate, processed meats and ready meals. You also find potassium in many healthy foods, so you may need to make swaps to some of your fruits, vegetables and the types of potatoes you eat.

This is not an exhaustive list, for more information on food groups and portion sizing please refer to the Kidney Kitchen on the Kidney Care UK website*
http://kidneycareuk.org/get-spport/healthy-diet-support/kidney-kitchen/

HIGH-POTASSIUM FOODS

Fruits

- Bananas, currants, oranges
- Dried fruits
- Fruit juice

Vegetables

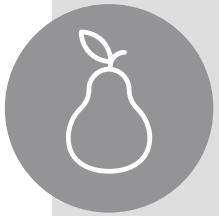
- Avocados, artichokes, mushrooms
- Sun dried tomatoes
- Dark-colored and leafy vegetables (spinach, Swiss chard)
- Dried beans, black beans, refried beans, baked beans

Other

- Chocolate
- Nuts, seeds
- Bran
- Processed meat and nuts

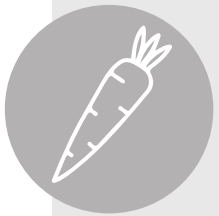
*These websites are not controlled by Bayer

LOW-POTASSIUM FOODS



Fruits

- Small pear or apple, 1 satsuma, 10 grapes, drained tinned fruit



Vegetables

- Broccoli, cabbage, carrots, runner beans, peas, bean sprouts, aubergine
- Lettuce
- Tinned or soaked and boiled beans and pulses (e.g. black beans, chick peas and lentils)

Other

- Rice, noodles, bread
- Pita, tortillas
- Herbs and spices (use to avoid salt substitutes)

Talk with your healthcare provider about managing your potassium intake while taking Kerendia.

Reference
1. Lowering your potassium levels patient information resource, Kidney Care UK. Available at: https://www.kidneycareuk.org/lower-potassium Accessed: October 2025.

External resources to help you learn more about CKD in type 2 diabetes (T2D)*

- Kidney Care UK
  https://www.kidneycareuk.org/
- National Kidney Federation
  https://www.kidney.org.uk/
- The UK Kidney Association
  https://ukkidney.org/

For illustrative purposes only to help identify the product packaging

*These websites are not controlled by Bayer

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Questions and notes

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For full information about Kerendia, please see the Patient Information Leaflet included in the medicine package.

PP-KER-GB- 0832
Date of preparation
October 2025