

In adults with chronic kidney disease in type 2 diabetes (CKD in T2D),

KERENDIA is proven to slow the progression of CKD



Indication and Important Safety Information

What is KERENDIA?

KERENDIA (finerenone) 10mg, 20mg tablets is a prescription medicine used to:

• reduce the risk of worsening of kidney disease, kidney failure, death due to cardiovascular disease, heart attack, and hospitalization for heart failure in adults with chronic kidney disease (CKD) associated with type 2 diabetes (T2D)

Important Safety Information

Do not take KERENDIA if you:

- Are allergic to any of the ingredients in KERENDIA
- Take certain medications called CYP3A4 inhibitors. Ask your healthcare provider if you are not sure if you are taking any of these medications
- Have problems with your adrenal glands

See Important Safety Information throughout and Important Facts about KERENDIA on pages 9-10.



What is chronic kidney disease in type 2 diabetes (CKD in T2D)?

CKD in T2D is a condition that involves a gradual loss of kidney function caused by damaged kidneys. Over time, damaged kidneys lose their ability to filter waste and excess fluids from your body and may lead to kidney failure, dialysis, and kidney transplant.

CKD can lead to cardiovascular problems, such as a heart attack

When damage caused by CKD reduces your kidneys' ability to do their job, more stress is put on your heart. Helping your kidneys may help lower certain cardiovascular risks.



People with CKD in T2D are 3 times more likely to die from a cardiovascular event such as a heart attack than people who have T2D alone.

Did you know?

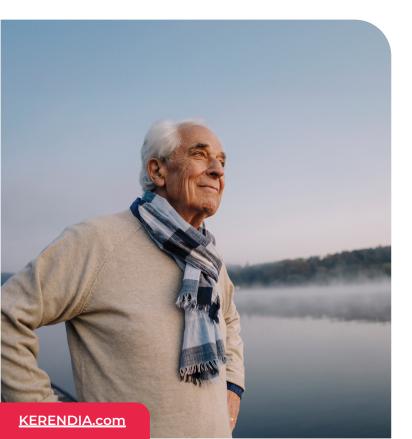
Kidney damage from CKD in T2D can be permanent, so it's important to take action to help slow progression.



Scan the QR code with your phone to learn how CKD can affect your heart or visit KERENDIA.com/heart.



Scan the QR code with your phone to learn more about CKD in T2D, or visit KERENDIA.com/kidnevs



Important Safety Information (cont'd)

What are the possible side effects of KERENDIA?

KERENDIA may cause serious side effects, including:

 High potassium levels in your blood (hyperkalemia). Your healthcare provider will check your potassium level before and during treatment with KERENDIA

The most common side effects of KERENDIA include hyperkalemia (potassium level in your blood that is higher than normal), hypotension (blood pressure that is lower than normal), and hyponatremia (sodium level in your blood that is lower than normal).

See Important Safety Information throughout and Important Facts about KERENDIA on pages 9-10.



How is CKD in T2D diagnosed and tracked?

CKD in T2D often has **no symptoms until it is in its advanced stages**. That's why it's important to monitor your lab work and condition with your doctor. The progression of your CKD in T2D can be tracked using two tests:

UACR

(urine albumin-to-creatinine ratio)
A urine test that detects the presence of protein in the urine. This is one of the earliest indicators of CKD.



eGFR

(estimated glomerular filtration rate)
A blood test that measures how well your kidneys are functioning.

CKD is defined as having an eGFR less than 60 or a UACR equal to or greater than 30 for more than 3 months.

Date	My UACR	My eGFR
/		
/		
/		
/		
/		
/		

Stages of CKD Based on eGFR



Stage 1

eGFR of 90 or greater
Normal function



Stage 3B

eGFR between 30 and 44 Moderate-to-severe loss of function



Stage 2

eGFR between 60 and 89 Mild loss of function



Stage 4

eGFR between 15 and 29 Severe loss of function



Stage 3A

eGFR between 45 and 59 Mild-to-moderate loss of function



Stage 5

eGFR less than 15 **Kidney failure**

Important Safety Information (cont'd)

Before you take KERENDIA, tell your healthcare provider about all your medical conditions, including if you:

- Have high potassium levels in your blood (hyperkalemia) or take medications that may increase potassium levels in your blood
- Have severe liver problems
- Are pregnant or plan to become pregnant, or are breastfeeding or plan to breastfeed. Avoid breastfeeding during treatment with KERENDIA and 1 day after treatment

See Important Safety Information throughout and Important Facts about KERENDIA on pages 9-10.



How KERENDIA can help

KERENDIA is a once-daily oral tablet that can help slow the progression of CKD and lower the risk of cardiovascular complications in adults with CKD in T2D.

KERENDIA is proven to:

- Lower the risk of:
 - Having a heart attack
 - · Cardiovascular death
 - Hospitalization for heart failure
- Slow the loss of kidney function
- Reduce the risk of kidney failure



KERENDIA fights CKD in T2D differently than diabetes medications—but doesn't replace them

How does KERENDIA work differently?

- KERENDIA is the only medication of its kind that blocks mineralocorticoid receptor (MR) overactivation in the kidney, heart, and blood vessels.
- MR overactivation may contribute to inflammation and scarring in the kidneys, which can lead to the progression of kidney disease and may also worsen your cardiovascular disease.
- \cdot Blocking MR overactivation is thought to slow the progression of CKD in T2D.

So even if you are already taking medications for your diabetes and high blood pressure, there may be more you can do to help delay the damage from CKD.





Scan the QR code with your phone to learn more about how KERENDIA works or visit: KERENDIA.com/howitworks.

Important Safety Information (cont'd)

Tell your healthcare provider about all the prescription and over-the-counter medicines you take, including salt substitutes, vitamins, and herbal or potassium supplements.

 KERENDIA may affect the way other medications work, and other medications may affect how KERENDIA works. Do not start or stop any medicine before you talk with your healthcare provider. Avoid grapefruit or grapefruit juice as it may increase KERENDIA levels in the blood

Please see the <u>Prescribing Information</u> for KERENDIA.

See Important Safety Information throughout and Important Facts about KERENDIA on pages 9-10.



Starting KERENDIA

Before starting you on KERENDIA, your doctor will order some lab tests. These tests will help your doctor figure out which dose to start with. After a few weeks on KERENDIA, your doctor will order some additional lab tests to see if any dose adjustments are needed.

- 1 Once you have started KERENDIA, your doctor will periodically check the potassium levels in your blood and your estimated glomerular filtration rate (eGFR)
- 2 These tests are to make sure you are receiving the correct dose of KERENDIA, as well as to check your kidney function
- 3 Once your doctor has your lab results, they may adjust your dose as needed
- 4 Your doctor will continue to routinely monitor your potassium level and eGFR to ensure that you are receiving the correct dose of KERENDIA

Taking an active role in your treatment can help you understand the decisions your doctor makes—don't hesitate to ask questions about your lab results and your treatment.



Questions to ask your doctor

Understanding why your doctor has prescribed KERENDIA can help you start strong and stay on treatment. Use the below questions to start the conversation.



Can KERENDIA help slow the progression of my CKD in T2D and lower my risk of kidney failure?



What are the possible side effects of KERENDIA?



Can I take KERENDIA with my other medications?



How long will I need to take KERENDIA?

See Important Safety Information throughout and Important Facts about KERENDIA on pages 9-10.



Taking KERENDIA

- It's important to take KERENDIA as prescribed.
- KERENDIA is a once-daily oral tablet. You should swallow the tablet whole. If you are unable to swallow a whole tablet, KERENDIA may be crushed and mixed with water or soft foods such as applesauce immediately prior to use and taken orally.
- If you miss a dose of KERENDIA, take your prescribed dose as soon as you remember before the next scheduled dose. **Do not take 2 doses on the same day to make up for a missed dose**.
- Take KERENDIA as prescribed and do not start or stop any medicine before talking with your doctor, including your diabetes and high blood pressure medications. Check with your doctor or pharmacist if you're not sure.
- Tell your healthcare provider about all the prescription and over-the-counter medicines you take, including: salt substitutes, vitamins, and herbal or potassium supplements. KERENDIA may affect the way other medications work, and other medications may affect how KERENDIA works. Do not start or stop any medicine before you talk with your healthcare provider. Avoid grapefruit or grapefruit juice as it may increase KERENDIA levels in the blood.

Taking KERENDIA properly helps ensure you're getting the most from your treatment



Important Safety Information (cont'd)

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.

Please see the **<u>Prescribing Information</u>** for KERENDIA.

See Important Safety Information throughout and Important Facts about KERENDIA on pages 9-10.

<u>KERENDIA.com</u>



Save on KERENDIA

Financial support programs and tools are available to help you start and stay on KERENDIA.



Start saving with the KERENDIA Savings Card

Eligible patients* may pay as little as \$0 per month for KERENDIA.



Scan the QR code or visit KERENDIA.com/copav to enroll and start saving today.

*Patients are eligible if they are commercially insured and may pay as little as \$0 per month. Benefit limitations apply. Patients who are enrolled in any type of government insurance or reimbursement programs are not eligible. Full terms and conditions apply, see KERENDIA.com/copay.

Medicare Extra Help

Also known as Low Income Subsidy (LIS), this program helps people with limited income and resources pay for their Medicare Part D drug coverage premiums, deductibles, co-insurance and other costs.

You can apply for Medicare Extra Help, or get more information at your local Social Security office, by calling <u>1-800-772-1213</u> or visiting the Security Administration's website at <u>secure.ssa.gov/i1020/start</u>.

Bayer US Patient Assistance Foundation



If you cannot afford your prescription medication, Bayer may be able to help.

The Bayer US **Patient Assistance Foundation** is a charitable organization that helps eligible patients get Bayer prescription medicine at no cost.

Please contact the program at <u>1-866-2BUSPAF (228-7723)</u> Monday–Friday, 9:00 AM–6:00 PM ET or visit the foundation website at <u>www.patientassistance.bayer.us</u> for information to see if you may qualify for assistance.

If you have Medicare Part D, please visit **KERENDIA.com/medicare** to learn about your financial support options.



Scan the QR code or visit

KERENDIA.com/savings to learn
about programs that may help
with the cost of your medication.



Toll Free Assistance

If you have questions about KERENDIA or would like more information about KERENDIA savings programs, call **1-888-KERENDIA** (537-3634).

See Important Safety Information throughout and Important Facts about KERENDIA on pages 9-10.



Save on your prescription with BlinkRx

BlinkRx is a digital pharmacy that looks for, and applies, eligible savings based on your insurance. After you register and check out, BlinkRx will also deliver your KERENDIA prescription to your home with no delivery charge.



You can ask your doctor to send your prescription to BlinkRx, or you can transfer your prescription yourself by calling <u>1-866-839-0766</u> or visiting <u>BlinkRx.com</u>.

KERENDIA Patient Support Program

The KERENDIA Patient Support Program offers resources to help you start and stay on therapy.



Email Support

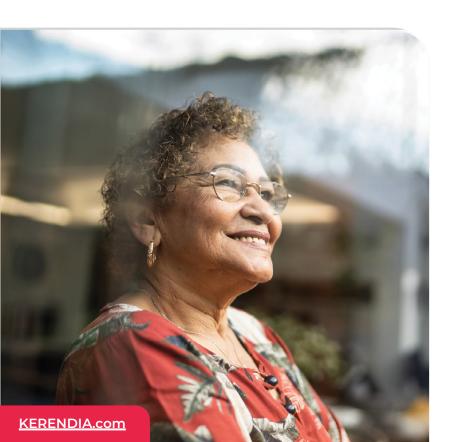
Scan the code to receive information, resources, and lots of motivation to help guide you through the start of your treatment journey, or visit KERENDIA.com/email.



KERENDIA Mentor Program

Sign up for the KERENDIA Good Start program to connect with a mentor that offers personalized communication and educational support by phone, text, or email during your first months on KERENDIA. Scan the code with your phone, or visit







KERENDIA Helpline Support

Call <u>1-888-KERENDIA (1-888-537-3634)</u>, 9:00 AM–6:00 PM (ET), Monday–Friday, for questions about KERENDIA savings and support programs.

See Important Safety Information throughout and Important Facts about KERENDIA on pages 9-10.



About KERENDIA

KERENDIA (finerenone) 10mg, 20 mg tablets is a prescription medicine used to:

• reduce the risk of worsening of kidney disease, kidney failure, death due to cardiovascular disease, heart attack, and hospitalization for heart failure in adults with chronic kidney disease (CKD) associated with type 2 diabetes (T2D)

Who should not take KERENDIA

- Patients who are allergic to any of the ingredients in KERENDIA
- Patients who take certain medications called CYP3A4 inhibitors. Ask your healthcare provider if you are not sure if you are taking any of these medications
- Patients who have problems with adrenal glands

Warnings about KERENDIA

KERENDIA can cause the potassium level in your blood to increase (hyperkalemia). Your healthcare provider will check your potassium level and kidney function before starting and during treatment with KERENDIA. Before taking KERENDIA, tell your healthcare provider if you have high levels of potassium in your blood, or take medications that may increase potassium in your blood.

Before starting KERENDIA

Tell your healthcare provider if you:

- Have severe liver problems
- Are pregnant or plan to become pregnant, or are breastfeeding or plan to breastfeed. Avoid breastfeeding during treatment with KERENDIA and 1 day after treatment
- Take any prescription and over-the-counter medicines, salt substitutes, vitamins, and herbal or potassium supplements

What you should know while taking KERENDIA

- KERENDIA may affect the way other medications work, and other medications may affect how KERENDIA works. Do not start or stop any medicine before you talk with your healthcare provider
- Avoid grapefruit or grapefruit juice as it may increase KERENDIA levels in the blood

Important Facts about Kerendia are continued on the next page.



Important Facts about KERENDIA (finerenone) (cont'd)

Possible side effects of KERENDIA

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

- Hyperkalemia (potassium level in your blood that is higher than normal)
- Hypotension (blood pressure that is lower than normal)
- Hyponatremia (sodium level in your blood that is lower than normal)

Tell your healthcare provider if you have any side effects that bother you or do not go away.

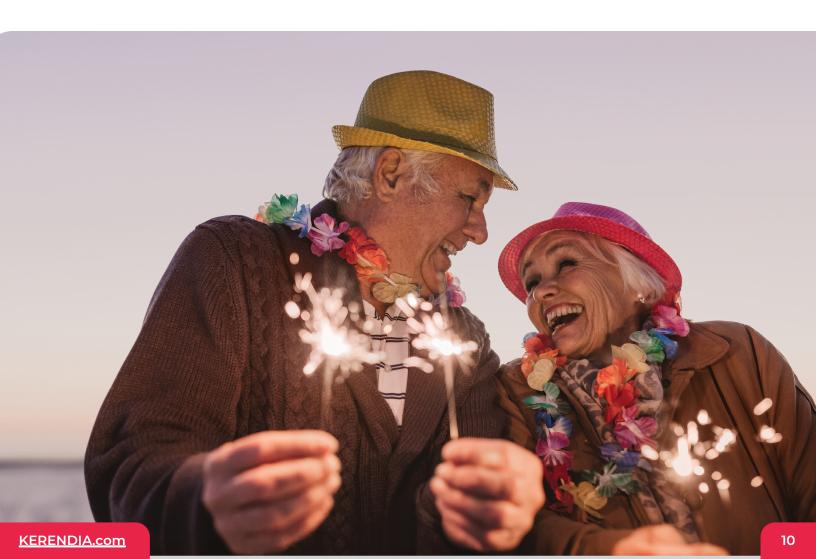
The risk information provided here is not comprehensive.

How to get more information:

- Talk to your healthcare provider or pharmacist
- Visit www.Kerendia.com to obtain the FDA-approved product labeling
- Call <u>1-888-KERENDIA</u>

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.

See Important Safety Information throughout.





View the Getting Started Guide

The KERENDIA Getting Started Guide is an online brochure that has lots of important information about your treatment, including how to take KERENDIA and Q&As.



Scan the QR code with your phone's camera to view the Getting Started Guide or visit KERENDIA.com/resources.

It's very important that you continue to stay on treatment

- KERENDIA is proven to slow the progression of CKD in T2D.
- CKD in T2D is a progressive disease, which means that it cannot be cured and the damage to your kidneys cannot be reversed. Without treatment, CKD will continue to get worse. As CKD gets worse, it may lead to kidney failure, requiring either dialysis or kidney transplant.
- CKD in T2D often has no symptoms until it is in its advanced stages. That's why it is important to monitor your lab work and condition with your doctor.

Questions about starting KERENDIA?

Visit KERENDIA.com/gettingstarted or call 1-888-KERENDIA (537-3634).

Important Safety Information (cont'd)

Do not take KERENDIA if you:

- Are allergic to any of the ingredients in KERENDIA
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Please see Prescribing Information for KERENDIA at kerendia.com/pi.

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