Kerendia® finerenone

PBS Listed

The Evolving Management of Chronic Kidney Disease in Type 2 Diabetes

Orange

Meeting Details

VENUE
The Remington Orange 1517
Forest Rd, Orange NSW

DATE & TIME
Tuesday 21st May 2024
7:00pm - 9:00pm

Speaker

Dr Manik Mayadunne FRACP, MBBS
Staff Specialist Endocrinologist and Physician in General Medicine, Orange Health Service Lecturer in Medicine, Charles Sturt University

Dr Matthew Anderson BMed MMed (Clin Epi) FRACP
Staff Specialist Nephrologist based at Orange Health Service

To RSVP, scan the QR code OR fill our your details on the back & send to your Bayer representative

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Agenda

	Topic
6:30 – 7:00 pm	Arrivals
7:00 – 7:05 pm	Welcome & Introduction
7:05 – 7:45 pm	Overview of the evolving treatment landscape for CKD in type 2 diabetes
7:45 – 8:15 pm	Introduction to Finerenone
8:15 – 8:50 pm	Practical management case discussions
8:50 – 9:00 pm	Audience Q&A
9:00 pm	Close

BAYER

This meeting is organised and fully funded by Bayer. This event is for Healthcare Professionals only and will contain a discussion of Bayer products. Bayer will not subsidise for travel, accommodation, expenses of any guest, spouse, family member or other companion of the invited HCP.

Privacy Consent: By accepting this invitation and registering for the Event I consent to Bayer Australia Ltd collecting, using, storing and disclosing the information provided by me on this form in accordance with the Privacy Consent Form below.

HCP Details*

*Name:

*Email:

*Phone number:

*Signature:

*Practice address:

*Dietary Requirements:

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Further information about our collection, use, storage and disclosure of your personal information is contained in our Privacy Policy, which is available on our website www.bayer.com.au or electronically at your request. Furthermore, every electronic Marketing/Medical communication we send to you includes an option for you to easily revoke your consent (opt-out). In the event of a safety alert or product recall, Bayer will use all means for communication, regardless of consent status.

PBS information: Authority Required (STREAMLINED). Refer to PBS Schedule for full authority information.

Please refer to the full Product Information (PI) before prescribing.
PI can be accessed by scanning the QR code or available on request by calling Medical Information on 1800 008 757.

▼ This medicinal product is subject to additional monitoring in Australia. This will allow quick identification of new safety information. Healthcare professionals are asked to report any suspected adverse events at www.tga.gov.au/reporting-problems.

Minimum Product Information Kerendia® (finerenone) INDICATIONS: Kerendia is indicated to delay progressive decline of kidney function and to reduce the risk of cardiovascular mortality and morbidity in adults with chronic kidney disease (with albuminuria) associated with type 2 diabetes, in addition to standard of care. **CONTRAINDICATIONS:** Patients taking concomitant medications that are strong CYP3A4 inhibitors (e.g., itraconazole, ketoconazole, ritonavir, nelfinavir, cobicistat, clarithromycin, telithromycin and nefazodone); patients with adrenal insufficiency. **SPECIAL WARNINGS AND PRECAUTIONS:** Hyperkalaemia (initiation of Kerendia treatment is not recommended if serum potassium > 5.0 mmol/L); hepatic impairment (avoid use in severe); renal impairment (initiation not recommended in estimated glomerular filtration rate (eGFR) < 25 mL/min/1.73m^2; continue treatment with caution monitoring serum potassium levels in patients with end stage renal disease (eGFR < 15 mL/min/1.73 m^2); paediatric patients (not recommended); pregnancy (Category D) and lactation. See full PI for details. **INTERACTIONS WITH OTHER MEDICINES:** Avoid concomitant use with: potassium-sparing diuretics (e.g., amiloride, triamterene); other mineralocorticoid receptor antagonists (MRAs) (e.g., eplerenone, spironolactone); strong CYP3A4 inducers (e.g., rifampicin, carbamazepine, phenytoin, phenobarbital, St John's Wort) or moderate CYP3A4 inducers (e.g., efavirenz); and grapefruit or grapefruit juice. Use with caution and monitor serum potassium when taken concomitantly with: potassium supplements; trimethoprim, or trimethoprim-sulfamethoxazole; moderate and weak CYP3A4 inhibitors (e.g., moderate: erythromycin and verapamil; and weak: amiodarone and fluvoxamine). See also Contraindications above. See PI for full details. **ADVERSE EFFECTS:** Please refer to PI for a complete list. Very common and common adverse reactions (≥ 1%) include: hyperkalaemia, hyperuricemia, hyponatremia, hypotension and glomerular filtration rate decrease. **DOSAGE AND ADMINISTRATION:** Dose may be affected by eGFR and serum potassium levels. The recommended target dose of Kerendia is 20 mg once daily. The recommended starting dosage is 10 mg or 20 mg orally once daily based on eGFR and serum potassium levels. See PI for full details. **BASED ON PI DATED:** 02 Aug 2023.

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PP-KER-AU-0194-1 Date of preparation: Apr 2024.

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