





CME ACTIVITY SERIES HIGHLIGHTS CHANGES IN CLINICIANS' KNOWLEDGE AND COMPETENCE ABOUT NOVEL APPROACHES TO REDUCE DKD PROGRESSION

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je Across Key Areas	• Di
34%▲ *p=<0.0001	action of the state of the stat
<u>63%</u> <u>57%</u> <u>77%</u>	an • Sin po dis
nd Efficacy and safety of non-steroidal MRAs in DKD	
N=527) Post-Test (N=306) Ombetence	CONCLUS
	The study demonstrate novel DKD treatment o
*p=<0.0001 63%	Although important ed approach, additional ed These may include person notably with SGLT-2 inf future applications, inco type 2 diabetes.
-risk for DKD progression and management of DKD patients	
N=520) Post-Test (N=309)	ACKNOW RESOURC
ACTICE CHANGES	This activity was jointly provided by the Cardiometabolic Health
55% 53% 43%	Congress and Postgraduate Institute for Medicine Supported by an independent educational
Incorporate albumin- Adequately screen and Recommend novel uria assessment when assess risk of DKD non-steroidal MRAs evaluating response to progression in T2DM when appropriate for CKD therapy in T2DM patients the treatment of CKD in patients patients with T2DM	grant from Bayer HealthCare Pharmaceuticals Inc.
	DISCLOSURES
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ING EDUCATIONAL GAPS

• Residual DKD risk and which pathophysiological processes do non-steroidal MRAs target

• Diagnosis and assessment of DKD

• Steroidal vs. nonsteroidal MRAs (mechanism of action, efficacy, safety, rationale for non-steroidal MRA)

• Results of ongoing clinical trials with nonsteroidal MRAs and additional sub-analyses of major trials

• Since finerenone received a recent FDA approval, its potential role in the treatment of DKD needs to be discussed further

LUSIONS

nonstrated significant improvement in knowledge and competence related to atment options and commitment to change among learners.

ortant educational gains were achieved, since this is a relatively novel itional education is needed to better understand the role of finerenone. lude perspectives on how it fits in with existing treatment options and more GLT-2 inhibitors, patient selection, as well as ongoing trials and additional tions, including for the treatment of chronic kidney disease (CKD) without

OWLEDGEMENTS & IRCES



for a PDF version



and resources on DKD

no conflicts of interest as it relates to this presentation