## BACKGROUND

We sought to determine the impact of a series of CME activities on the knowledge and competence of multi-disciplinary clinicians about novel approaches to reduce diabetic kidney disease (DKD) progression, with a focus on non-steroidal mineralocorticoid antagonists (MRAs).

## METHODS



## IMPACT ON KNOWLEDGE \& COMPETENCE

Knowledge Across Key Areas


INTENDED PRACTICE CHANGES


## ONGOING 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 Steroidar vs. nonsteroidal MRAs mechanism of
action, efficacy, safety, ationale 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


## CONCLUSIONS

The study demonstrated significant improvement in knowledge and competence related to novel $D K D$ treatment options and commitment to change among learners.

Although important educational gains were achieved, since this is a relatively novel These may include perspectives on how it to bittin with existing the erole of finerenone. These may include perspectives on how it itis in with existing treatment options and more
notably with SGIT-2 inhibitors, patient selection, as well as ongoing trials and additional future applications, including for the treatment of chronic kidney disease (CKD) without type 2 diabetes.

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 RESOURCES

[^0]The authors report no conflicts of interest as it relates to this presentation


[^0]:    DISClOSURES

