



## Question

Should I prescribe finerenone to patients with heart failure with preserved ejection fraction (HFpEF)?

## Answer

No, we do not recommend prescribing finerenone to patients with HFpEF.

## Background

The article "Finerenone in Heart Failure with Mildly Reduced or Preserved Ejection Fraction," published in *The New England Journal of Medicine* on October 24, 2024, presents data from a larger international, double-blind, randomized control trial of finerenone, a non-steroidal mineralocorticoid receptor antagonist, for its potential benefits in heart failure patients with mildly reduced or preserved ejection fraction (HFpEF), where steroidal options have shown limited benefit.

## Study Summary

The trial enrolled HF patients with an ejection fraction of 40% or greater, randomly assigning them to finerenone or placebo plus standard treatment. The primary outcome measured a composite of worsening HF events and death from cardiovascular (CV) events. Findings indicated that primary outcomes were less frequent in the finerenone group than in the placebo group (rate ratio = 0.84; 95% CI 0.74–0.95;  $p = 0.007$ ) with consistent support from subgroup analysis.

## Key Considerations

- **Efficacy:** Despite the reduced rate of primary outcomes, the actual difference in affected patients was only 3.2% lower in the finerenone group.
- **Safety Profile:** Hyperkalemia occurred more frequently in the finerenone group (9.7%) compared to placebo (4.2%), which may influence clinical decision-making.
- **Potential Bias:** The study was funded by Bayer, with one author employed by the sponsor, which could introduce bias.

## Bottom Line

Given finerenone's limited efficacy and side effect profile, we are unlikely to prescribe finerenone for patients with HFpEF; however, we will be unsurprised to see an increase in patients placed on this medication.