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Finerenone in Patients With FSGS: A FIND-CKD Analysis

Announcer:
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Dr. Heerspink:
Hello, this is Hiddo Heerspink from Kidney Week 2026 in Denver. We presented new data from the FIND-CKD trial, where we assessed the effects of finerenone in patients with FSGS. FSGS comprises a heterogeneous group of diseases and is characterized by podocyte injury, glomerular scarring, and proteinuria.

In the FIND-CKD trial, a large clinical trial in 1,584 participants with chronic kidney disease without diabetes, 215 patients had FSGS, 108 had a primary cause of FSGS, 107 a secondary cause of FSGS. In these patients, we assessed the effects of finerenone on the rate of kidney function decline and proteinuria, and we found that in the placebo group over 2.5 years of follow-up, the rate of decline in eGFR was 4.7 mL/min/year. This was reduced to 3.3 mL/min/year in the finerenone group, corresponding to a between-group difference of 1.3 mL/minute/year. These effects were similar in patients with primary and secondary FSGS.

In addition, finerenone compared to placebo also reduced albuminuria. This effect was directly present after 6 months of treatment and was sustained for the remainder of the treatment period. Finerenone also reduced proteinuria by 40% compared to placebo, a similar magnitude as we had seen on albuminuria.

In these patients with FSGS, finerenone was well tolerated. The proportion of patients with adverse events was similar between the finerenone and placebo group, just like the proportion of patients with serious adverse events.

Hyperkalemia did not occur more with finerenone compared to placebo, and there were very few hyperkalemia events that led to discontinuation and none led to death.

So finerenone is an effective and safe medication for patients with FSGS for whom there are currently very few treatment options, and thus I believe that we have to implement these findings in our clinical practice.

I thank you for listening.

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