

Efficacy and safety of finerenone according to age in HFmrEF/HFpEF: The FINEARTS-HF Trial

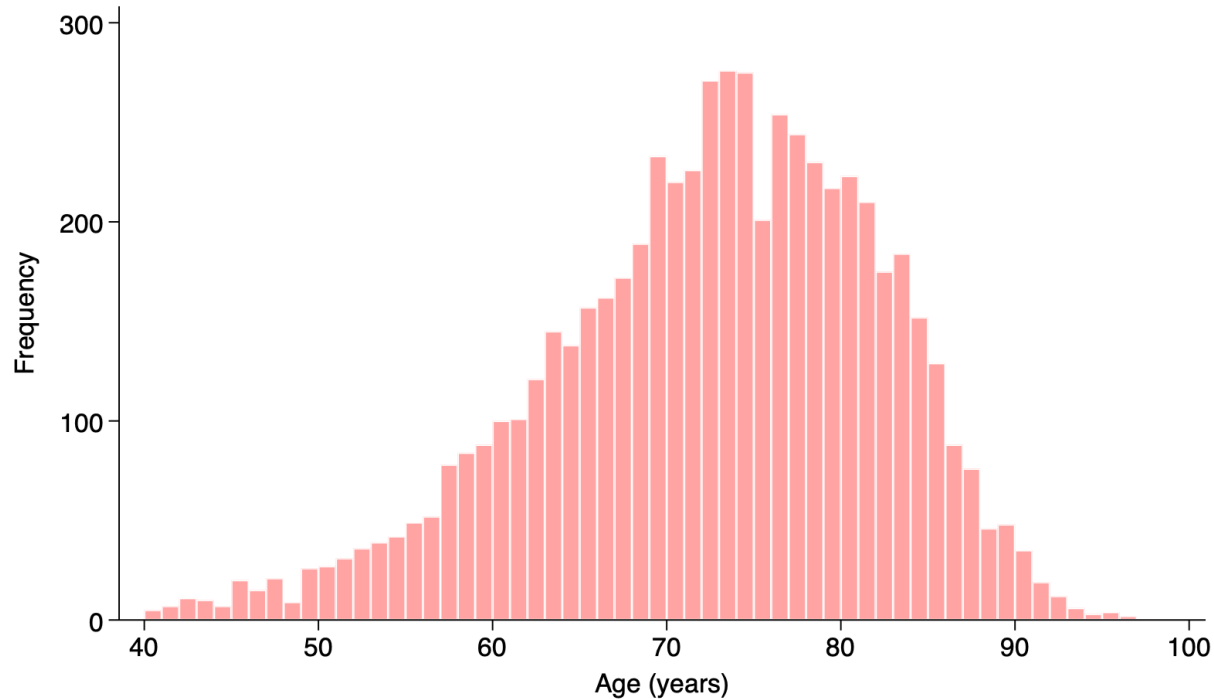
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FINEARTS-HF committees and investigators**

FINEARTS-HF age analysis: Results

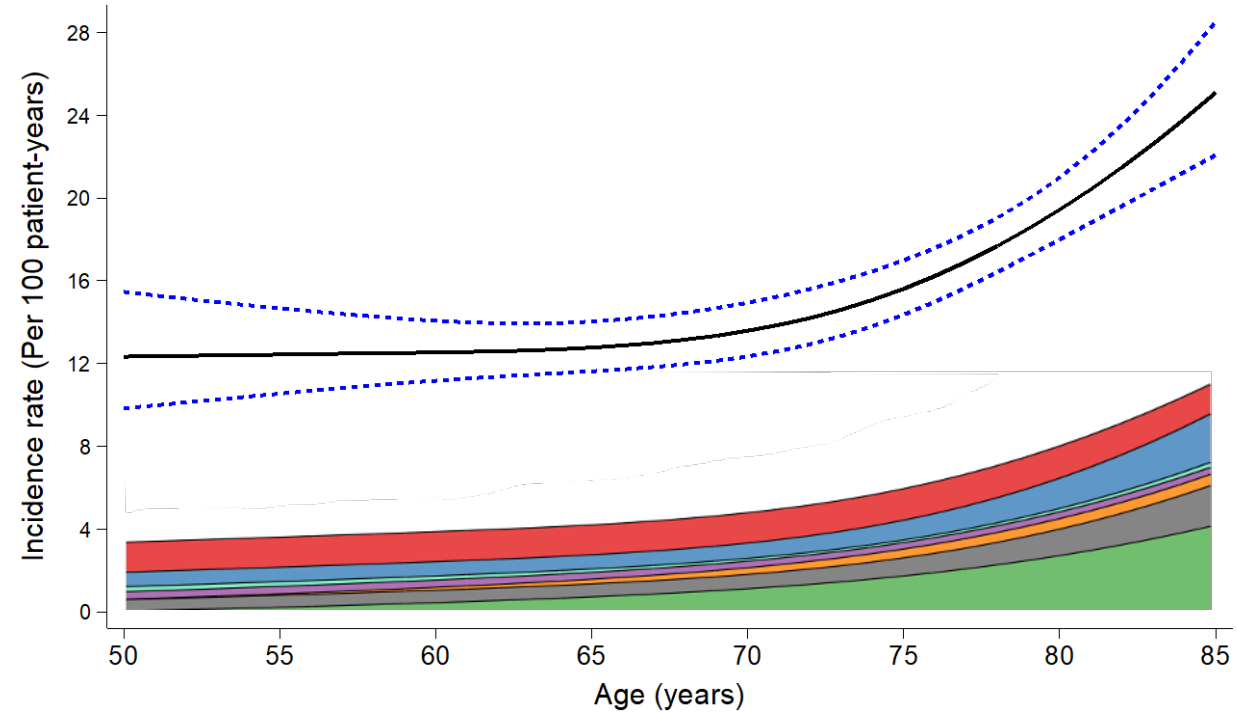
Distribution of age at baseline

Mean 72y ± SD 10 (range 40-97)
64% aged ≥70y and 24% aged ≥80y



Age and risk of outcomes

Cardiovascular death and total worsening HF events

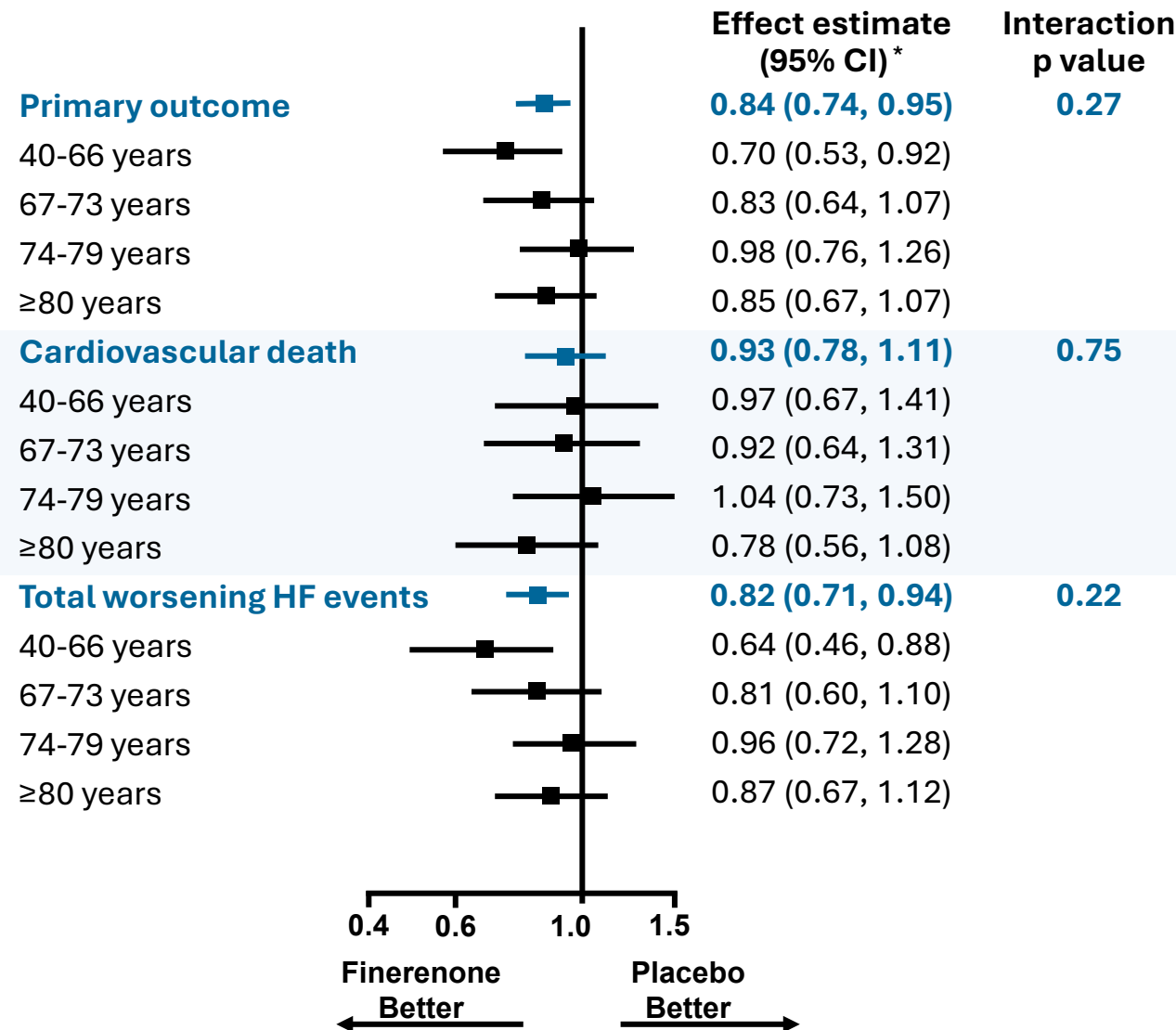


- ↑ Women ↓ CAD, diabetes
 ↑ AF, stroke, anemia ↓ KCCQ
 ↑ NT-proBNP ↓ BMI, eGFR, Hgb

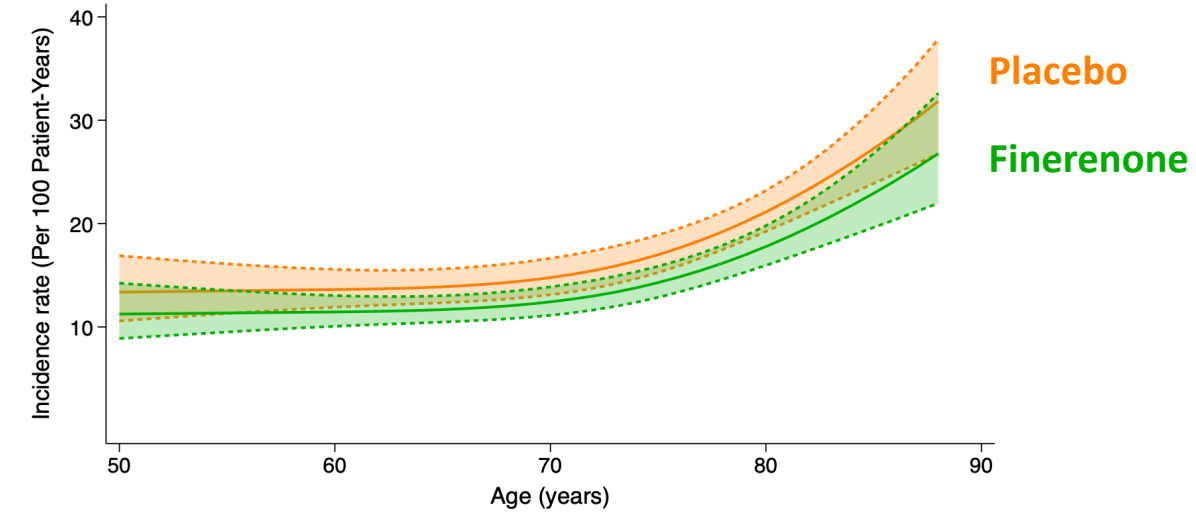
- Sudden death
- HF death
- MI death
- Stroke
- Other CV deaths
- Undetermined death
- Non-CV death

With increasing age:

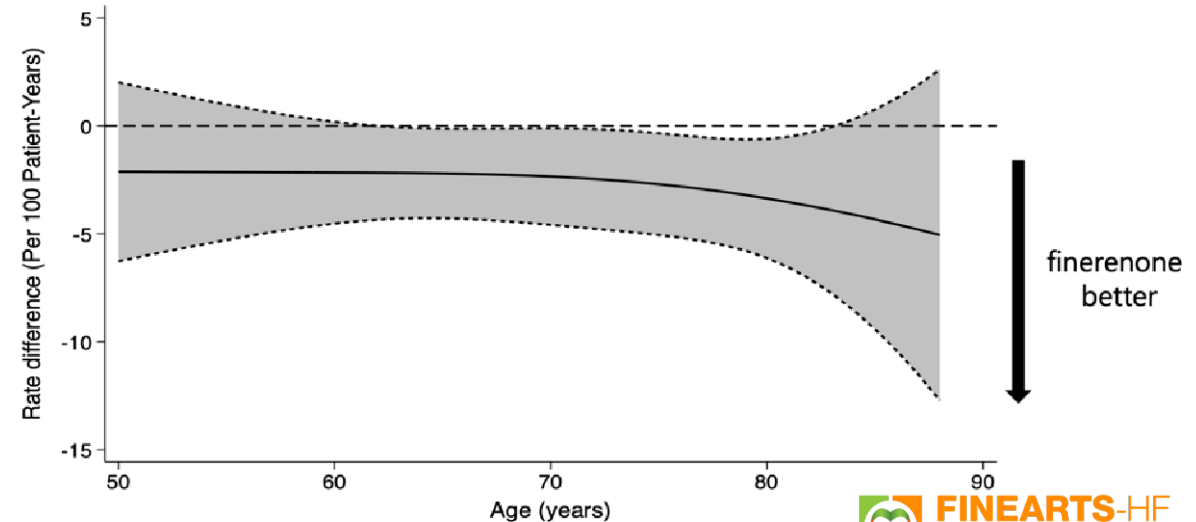
FINEARTS-HF: Treatment effects by age



Cardiovascular death and total worsening HF events

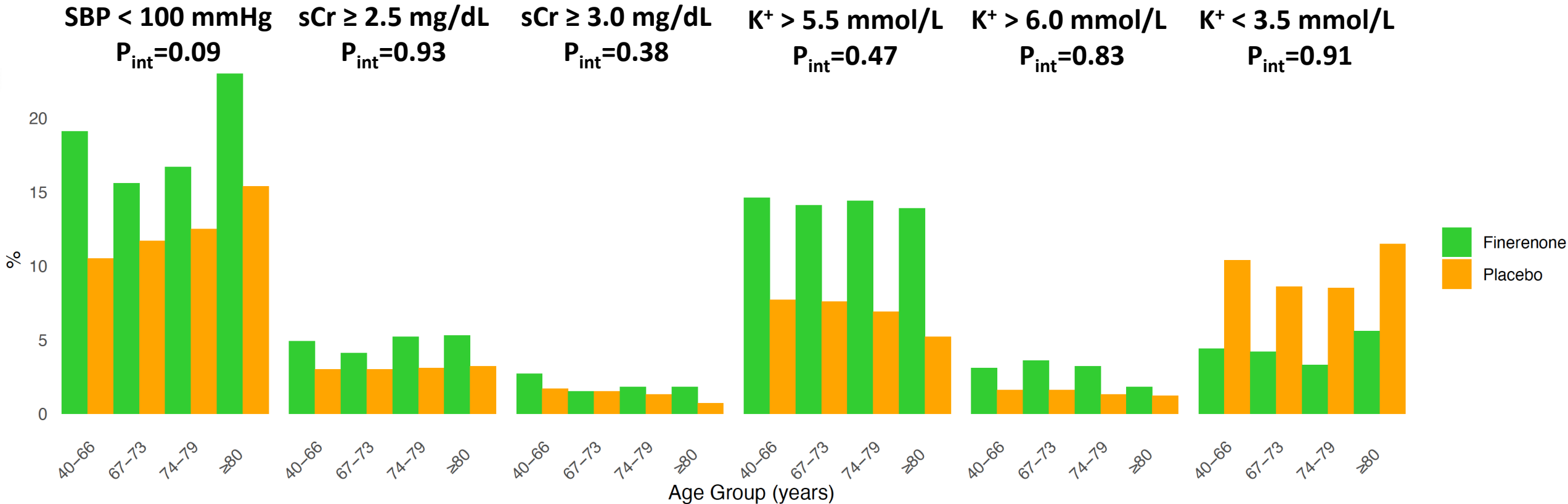


Absolute risk reduction across age range



*The effect estimate for total (i.e. first and recurrent) event outcomes is a rate ratio and for time-to-first event outcomes is a hazard ratio.

FINEARTS-HF: tolerability by age



Conclusions

In the FINEARTS-HF trial, finerenone reduced the risk of cardiovascular death and total HF events, and improved symptoms across a wide age spectrum. In addition, finerenone was safe and well-tolerated, irrespective of age.