

## Background

Finerenone a selective, nonsteroidal, mineralocorticoid receptor antagonist (MRA), has been recently approved for the treatment of CKD. Studies show that Finerenone plays an important role in reduced the risk of adverse cardiovascular and kidney outcomes compared with patients treated with standard care of therapy.

## Objectives

The objective of this research was to estimate the 5-year financial impact of adding Finerenone to the hospital formulary of a tertiary hospital in Riyadh, Saudi Arabia.

## Methods

Budget impact analysis (BIA) was performed from a payer perspective: Tertiary hospital in Riyadh, Saudi Arabia. Costs of Finerenone was calculated for patients with an average duration of treatment 52 weeks. The target population was determined using hospital statistical data, and clinical evaluation data.

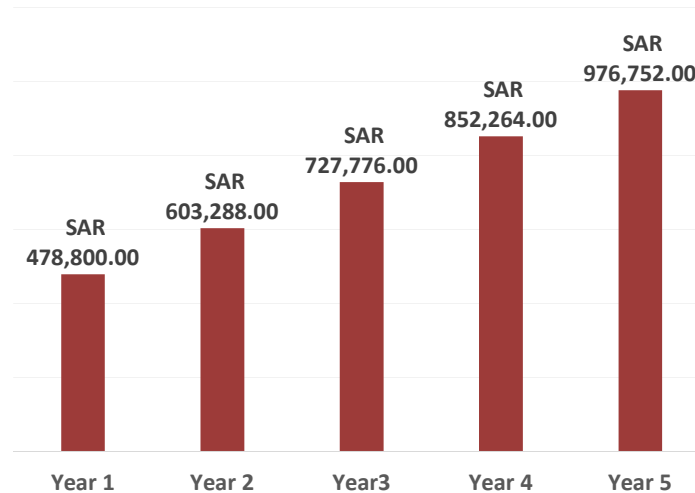
## Results

Over 5 years after the addition of the drug to the hospital formulary and from the health care payer perspective "pharmacy budget", we estimated the minimum population eligible for treatment to be 102 in all 5 years, with an estimated uptake rate of 50 % in year 1 and 100% in year 5.

**Table 1 Annual Cost of Finerone compared to SOC Medications**

Drug Name	Daily Dose	Unit Price	Annual cost /patient
Finerenone (KERENDIA®)	2 tablets Once Daily	SAR 13.30	SAR 9,576.00
DAPAGLIFLOZIN 10MG TABLET	Twice daily	SAR 1.84	SAR 1,324.80
FUROSEMIDE 40MG TABLET	Twice daily	SAR 0.15	SAR 105.84
CANDESARTAN CILEXETIL 16MG TABLET	Once Daily	SAR 0.28	SAR 100.08
LISINOPRIL DIHYDRATE 10MG TABLET-	Once Daily	SAR 0.06	SAR 20.52

**Figure 1. Budget impact of Finerone by year**



The gross impact on the pharmacy budget was estimated to be SAR 478,800.00 in year 1 and SAR 976,752.00 in year 5. The standard of care therapy including Dapagliflozin ,Furosemide ,Candesartan Cilexetil , and Lisinopril were assumed to be an alternative; the net medicines budget impact is expected to be SAR 77,522.00 in year 1 and SAR 158,144.00 in year 5.

## Conclusions

In a Saudi Practice setting, the addition of Finerenone to standard of care is associated with substantially increased costs . Standard of care therapy could be a better formulary option from a pharmacy budget perspective.

## References

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