

Dear Renal Lifecycle participant,

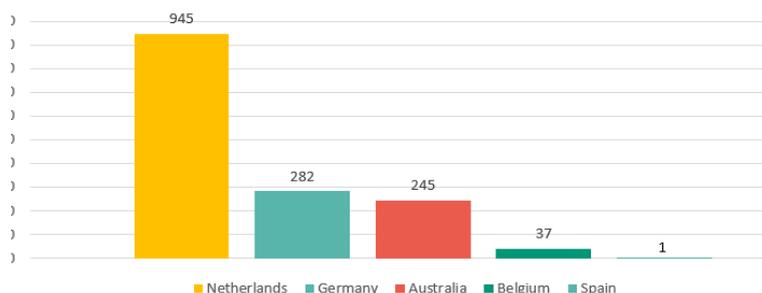
Thank you for participating in the study! In this newsletter, you will find an update on the current status in the various participating countries, as well as the results of the questionnaire on experiences with participation from Dutch participants. Would you like to share your experiences in this newsletter? Or do you have any questions, comments, or suggestions for the newsletter? We would be happy to receive them via the following email address: renal.lifecycle.trial@umcg.nl.

Progress update

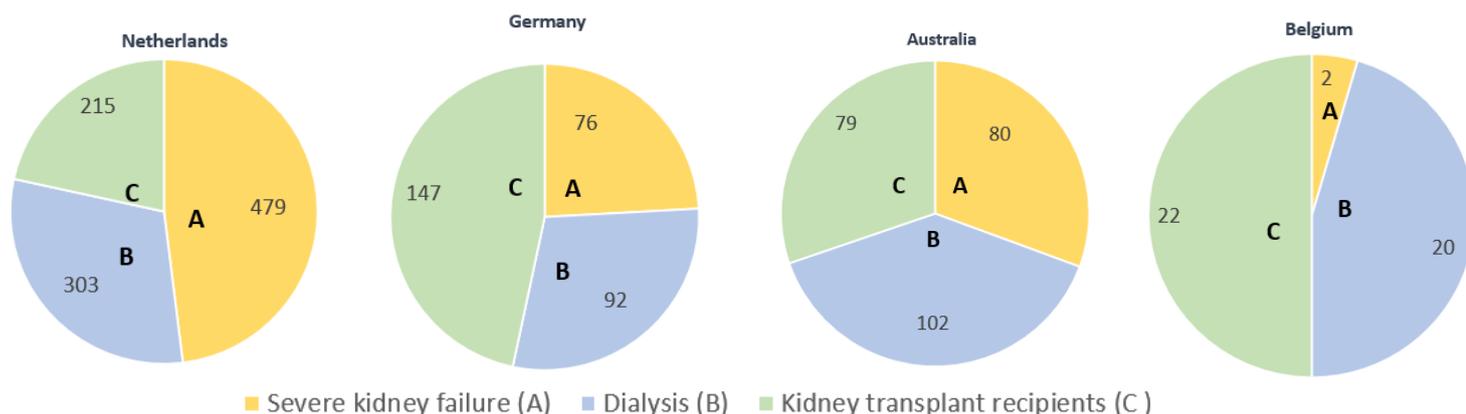
At this moment, **1510** people are participating in the study. With this, the previously agreed target of 1440 participants has been reached! Permission has now been granted to expand to 1750 participants, so that the results will be stronger and more reliable. In the chart on the right, you can see how many participants have started with the study medication per country.

It is important to mention that the Netherlands was the first to start (2022), followed by Germany (2023), then Australia (2023), Belgium (2025) and Spain (2025). Germany reached the agreed number of 250 participants last year, and Australia is already well on its way to reaching its target of 250 participants. In addition, Spain achieved a significant milestone last month: the first randomization visit was successfully carried out there! Finally, there are also positive developments in Singapore. The contract has been signed, and they are expected to open next month.

Number of participants per country, November 2025



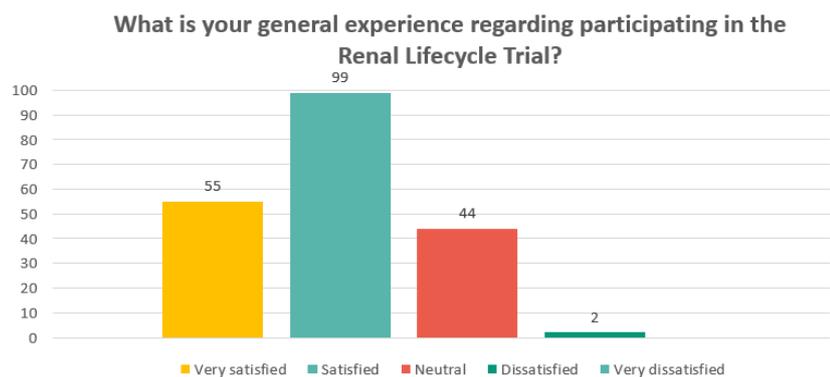
In the pie charts below, you can see the numbers of screened participants per group per country. In yellow (A), participants with severe kidney failure (kidney function <25%); in blue, people undergoing dialysis (B); and in green, kidney transplant recipients (C). Here you can see that the distribution differs per country, with proportionally more transplant participants in Germany and Belgium, while in the Netherlands relatively more people with severe kidney failure are taking part. This also corresponds to what is observed in clinical practice within these countries.



Questionnaire on experiences with participation in the Renal Lifecycle Trial

A total of 200 Dutch participants completed the questionnaire. Overall, most people were satisfied (see graph below). The support, information provided, and study burden were rated positively. Regarding the content of the newsletter, valuable suggestions were made, which we as the central research team will incorporate into this and future editions. One of the suggestions was to include country-specific statistics – you can find these on the previous page of the newsletter.

An important takeaway from this survey is the need to improve communication with participants. For future studies, it would be helpful to include consent for direct (email) communication from the central research team (in this case, UMCG) in the consent form signed at the start of participation. This would allow us to share important updates, such as newsletters, directly with all participants rather than through the local research teams.



Are there any results from the study yet?

Although the final results are not yet available, we can already say something about the safety of the drug at this stage. Very few participants have discontinued the study medication due to side effects. In addition, safety is being closely monitored by a group of experts. Their conclusion during the last meeting on October 14 was that there are no safety concerns and that the study can continue.

Regarding the efficacy of the study medication within this trial, we cannot yet provide any information, as it is a double-blind study. The physicians, nurses, and researchers do not know whether participants are receiving the actual drug or a placebo. Only at the end of the study the code will be broken, after which the data can be analyzed.

For the quality of the study, it is essential that participants complete the trial in full and do not discontinue the study medication prematurely, since otherwise we cannot draw reliable conclusions about efficacy. The expectation is that the study will continue at least until 2027, although this depends on how it progresses.

Interestingly, Professor Heerspink (also involved in this study) presented results last week from another trial showing that this drug also appears to be beneficial in people with Type 1 Diabetes. Hopefully, our study will demonstrate that it is effective in patients with severe kidney failure, those on dialysis, or those with a kidney transplant. Once again, continuing the study medication throughout the entire trial is of critical importance.