

## **INCREASES IN HEMOGLOBIN AND THE EFFECT OF ESA USE IN CKD PATIENTS TREATED WITH IV FERUMOXYTOL**

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Ferumoxytol is a carbohydrate-coated iron oxide with evidence for a lower free iron content than other IV irons. Registrational trials of ferumoxytol in CKD patients on and not on dialysis have demonstrated increases in hemoglobin (Hb) levels and a favorable safety profile vs. oral iron. Two Phase III trials in non-dialysis CKD patients compared ferumoxytol vs. oral iron in patients receiving and not receiving erythropoiesis-stimulating agents (ESAs). A total of 453 patients (181 receiving ESAs) were randomized to two IV injections of 510 mg ferumoxytol given in under a minute within 5 days, and 149 patients (65 receiving ESAs) were randomized to 200 mg/day of elemental iron orally for 21 days. The relationship between the Hb response at Day 35 and baseline Hb quartiles, before and after adjustment for concomitant ESA use, was evaluated. Across baseline Hb quartiles, there were greater increases in Hb in ferumoxytol vs. oral iron-treated patients, both for unadjusted mean changes (range: 0.81 to 1.28 vs. -0.1 to 0.73 g/dL, respectively) and after adjusting for ESA use (range: 0.86 to 1.31 vs. 0.04 to 0.74 g/dL, respectively). There was a trend towards greater Hb increases in ferumoxytol-treated patients who had lower baseline Hb levels. These data support the effectiveness of ferumoxytol in increasing Hb vs. oral iron in non-dialysis CKD patients in the presence and absence of ESAs across a range of baseline Hb levels.