Hyperphosphatemia is a serious condition resulting in an abnormally elevated level of phosphorus in the blood that is associated with an increased risk of cardiovascular disease, particularly stroke and heart attack, in patients with chronic kidney disease (CKD). For more information, please visit [https://ardelyx.com/](https://ardelyx.com/).

Tenapanor is a small, orally administered, first-in-class, non-binder therapy that selectively inhibits sodium-dependent phosphate cotransporters at theintestinal epithelium, the primary site of phosphate absorption. Tenapanor’s mechanism of action is based on its capacity to significantly reduce paracellular phosphate absorption, thereby lowering serum phosphorus levels.

Tenapanor is indicated in the U.S. as an adjunct to diet and phosphate binders to reduce serum phosphorus levels in adult patients with CKD on dialysis.

**About Tenapanor for Hyperphosphatemia**

Hyperphosphatemia is a key risk factor for cardiovascular disease and is a common complication among patients with CKD on dialysis. Serum phosphorus levels greater than 5.5 mg/dL have been shown to be an independent risk factor for cardiovascular morbidity and mortality in patients with CKD on dialysis. Despite treatment with phosphate binders, phosphorus levels ≥5.5 mg/dL are common in this population. In adult patients with CKD on dialysis, kidney function is significantly impaired, and phosphorus is not adequately eliminated from the body. As a result, phosphorus absorption at the primary site of phosphate absorption, the small intestine, is increased. In patients with CKD on dialysis, mean serum phosphorus levels are 7 mg/dL or higher in 40% to 50% of patients on dialysis, even when patients are taking multiple phosphate binders on a daily basis. In addition, 70% to 80% of patients on dialysis have phosphorus levels that do not decrease to a normal range (<4.6 mg/dL) even when patients are receiving maximum daily doses of phosphate binders.

Tenapanor has been studied in three Phase 3 clinical trials in the U.S., EMEA, and Japan. Tenapanor was generally well-tolerated, and most adverse events were mild or moderate in severity.

**This press release contains forward-looking statements made pursuant to the Private Securities Litigation Reform Act of 1995.**

**About Ardelyx, Inc.**

Ardelyx, Inc. is a biopharmaceutical company developing small, orally administered, first-in-class, non-binder therapies that selectively inhibit sodium-dependent phosphate transporters at the intestinal epithelium to lower serum phosphorus levels in adult patients with CKD on dialysis. Ardelyx’s mission is to develop and commercialize new therapies for the treatment of cardiorenal diseases. In [2020](https://ardelyx.com/), Ardelyx’s Phase 3 clinical trial program for tenapanor was designed to evaluate the safety and efficacy of tenapanor as an adjunct to diet and phosphate binders to reduce serum phosphorus levels in adult patients with CKD on dialysis. Tenapanor is currently being studied in three Phase 3 clinical trials in the U.S., EMEA, and Japan. Tenapanor was generally well-tolerated, and most adverse events were mild or moderate in severity. For more information, please visit [https://ardelyx.com/](https://ardelyx.com/).

**About Kyowa Kirin Co., Ltd.**

Kyowa Kirin Co., Ltd. is a global biopharmaceutical company focusing on therapeutic areas relevant to unmet medical needs and the needs of aging populations. The company, based in Tokyo, Japan, is committed to delivering innovative medicines to patients worldwide. For more information, please visit [https://www.kyowakirin.com/](https://www.kyowakirin.com/).

**For more information, please visit [https://ardelyx.com/](https://ardelyx.com/) and [https://kyowakirin.com/](https://kyowakirin.com/).**

**For media inquiries, please contact:**

Ardelyx, Inc.

Glenn M. Chertow, M.D., Ph.D.

655 South Market Street

Fremont, CA 94538 USA

Phone: 510-998-9200

E-mail: investor.relations@ardelyx.com

Kyowa Kirin Co., Ltd.

Hiroki Nakamura

Media

+81-3-5205-7205

E-mail: media@kyowakirin.com