Transcript Details
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Moving Beyond Immunosuppressive Therapy in IgAN

Announcer:
Welcome to *Clinicians Roundtable* on ReachMD. On this episode, we'll hear from Dr. Gates B. Colbert, who's an Assistant Clinical Professor at Texas A&M College of Medicine and practicing physician with the Kidney and Hypertension Associates of Dallas located at Baylor University Medical Center. He'll discuss the current challenges associated with immunosuppressive therapy for IgA nephropathy. Here's Dr. Colbert now.

Dr. Colbert:
So there have been challenges with aggressively treating IgA nephropathy for our patients. Historically, the backbone has been put a patient on a RAS inhibitor like an ACE or ARB, and then use steroids like prednisone or methylprednisolone once they're having proteinuria above 1 gram or higher. And this has been what we've been doing for decades. And it's helped a lot of patients, but unfortunately, it hasn't been the outstanding outcome that we have hoped for. And we know that when we put patients on steroid therapy, this is not a targeted treatment. It's a very broad treatment, and it can help the kidneys but there's also off-shooting side effects that patients unfortunately may experience. We know that it can start to increase their glucose levels, it may induce fatigue, it can change bone health, and other Cushingoid-type symptoms are definitely a possibility for these patients.

So while the backbone of using steroids has been beneficial for a lot of patients with IgA nephropathy, there's a lot of challenges that come with curbing those side effects. And at the same time, we know that it's not the cure that we hoped that it would be.

The future is really bright for non-immunosuppressive treatments for IgA nephropathy. There's a lot of studies going on right now. And you know, myself and other nephrologists around the U.S. are being asked to participate in different ongoing clinical trials looking for new targeted therapies. Additionally, we have some new medications that are being evaluated by the FDA or recently approved by the FDA that are non-immunosuppressive for this disease state. And so that's really, really exciting.

And I think we have some bright horizons coming for patients with IgA nephropathy that we haven't had in the past. And you know, I think one of the things that is really important is that we move towards a more targeted treatment strategy because historically, when we've used steroids, that's just a broad hit every receptor we can. But as we move towards targeted treatments for IgA nephropathy, I think that's when we're going to have the best results with the lowest side effect profile.

Announcer:
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