SPARSENTAN as First-line Treatment of Incident Patients With IgAN: Preliminary Findings from the SPARTAN Trial

ISN INTERNATIONAL SOCIETY OF NEPHROLOGY

STUDY DESIGN

Open-label, Single-arm, Multicenter, Exploratory trial

Investigating the safety and efficacy of Sparsentan as first-line therapy in patients newly diagnosed with IgAN

≥ 18 y.o with biopsy-proven IgAN (Within 6 months)
Proteinuria of ≥0.5 g/day
eGFR of ≥30 mL/min/1.73 m^2
No previous RAASi in last 1 year

Sparsentan for 110 weeks

Assessments include proteinuria, 24H ambulatory blood pressure, eGFR, measured GFR, repeat kidney biopsy and bioimpedance

PRELIMINARY RESULTS

12 patients (M:F = 7:5)
Mean age 36 (SD 12)
Median uPCR 1.3 g/g (IQR, 0.4-1.7)
Mean eGFR 70 mL/min/1.73 m^2 (SD 25)

Mean reduction of uPCR

Week 4
62.6%

Week 36
81.0%

67%
Complete Remission

eGFR
Blood Pressure
Body Weight
Total Body Water
Stable

RAASi : Renin angiotensin aldosterone system inhibitor
Complete remission: Proteinuria < 0.3g/day at any time during treatment

Conclusion: As first-line treatment in patients newly diagnosed with IgAN, preliminary findings show sparsentan was safe and generally well tolerated and reduced proteinuria >80% over 36 weeks, with minimal changes in total body water over time.

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