

# Targeting B Cells Upfront: Comparing safety and efficacy of Rituximab and Corticosteroids as a first-line therapy in newly diagnosed cases of adult-onset minimal change disease (B-RiPP study)

## COHORT

**Biopsy-proven MCD patients**

41.2 ± 12.4 yrs  
♂ 44 (61%)



Mean sCr 1.29 mg/dL, uPr 10 g/day

RTX → 100% depletion of CD19 B-cells

**N=35  
RITUX**



1 g × 2 doses,  
15 days apart

**Vs**

**N=37  
Steroids**



**RITUX**

**Steroids**

Complete Remission

**12**

Weeks

**86%**

**92%**

Additionally, two patients in the RTX arm and two in the steroid arm achieved PR

## Adverse events

13% developed cushingoid features, and other minor steroid-related toxicities were more frequent

**STERIODS**



**RITUX**

No clinically SAE

N=2, in Ritux group relapsed after attaining remission after 12 wks

**24**

Weeks

Complete Remission

**91%**

**93%**

**Conclusion:** RTX demonstrated efficacy comparable to corticosteroids in inducing remission in adult-onset MCD, with a more favorable safety profile. Given the reduced incidence of steroid-related toxicity, RTX represents a viable alternative as a first-line agent. However, long-term data on relapse rates, maintenance therapy strategies, and cost-effectiveness are warranted before establishing RTX as a first-line agent.

**Priti Meena, et al**

✉ @priti899

Visual abstract by **Gabriela Amador**

✉ @Gaby Neph



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