

Abstract Submission No.: A-0179**Efficacy and safety of telitacicept in IgA nephropathy: a real-world study****Lingqiu Dong, Wei Qin**

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Objectives : IgA nephropathy (IgAN) is the most common primary glomerular disease in the world, and the specific therapeutic methods are limited in IgAN. Telitacicept is a humanized fusion protein composed of a transmembrane activator and calcium-modulating cyclophilin ligand interactor receptor and human IgG. This study was designed to evaluate the efficacy and safety of telitacicept in adult patients with IgAN in a real-world study.

Methods : Biopsy-proven IgAN patients with 24-hour proteinuria greater than 0.5 g/day who received telitacicept 240 mg once a week were recruited in this study and 1:1 matched with patients who received supportive treatment only or immunosuppressive treatment by propensity score matching. The primary outcome was the change from baseline in 24-hour proteinuria over the 3-month follow-up.

Results : Twenty-one patients in each group were enrolled. The mean eGFR was 80.1 ml/min/1.73m², and the median 24-hour urine protein level was 1.48 g/day. At the end of the 3-month follow-up period, telitacicept reduced median proteinuria by 0.72 g/d (54.6%) from baseline, compared with a reduction of 0.18 g/d (20%) in the supportive treatment group (P < 0.001), and 1.12 g/d (72.1%) in the immunosuppressive treatment group (P = 0.814). Preserved eGFR levels were observed in the telitacicept group (1.9 ml/min/1.73 m² [4.3%]), while the eGFR level declined in the supportive treatment group (- 2.9 ml/min/1.73 m² [- 5.8%]) and immunosuppression group (- 6.1 ml/min/1.73 m² [- 8.4%]). No serious adverse events were observed in the telitacicept treatment group. Injection site reactions were more prevalent in the telitacicept group (8/21 [38.1%]), meanwhile immunosuppression group had more respiratory tract infections (7/21, [33.3%]).

Conclusions : Telitacicept can reduce proteinuria in patients with IgAN and showed a favourable safety profile in patients with IgAN.