IgAN Treatment Patterns in 2026: Real-World Insights from 2,100 Patient Charts Across the United States, the Five Major European Markets (EU5), and China

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BACKGROUND & OBJECTIVE

The treatment landscape for IgA nephropathy (IgAN) is rapidly evolving with the introduction of targeted therapies. This study evaluates real-world treatment patterns across the United States (US), Europe (EU5), and China, with a focus on the adoption and positioning of novel IgAN therapies.

METHODS

Analysis was conducted using retrospective chart audits of non-dialysis IgAN patients in the US (n=507), EU5 (n=567), and China (n=1,042). Data were collected from 865 nephrologists between January and March 2026 via an online, HIPAA-compliant survey.

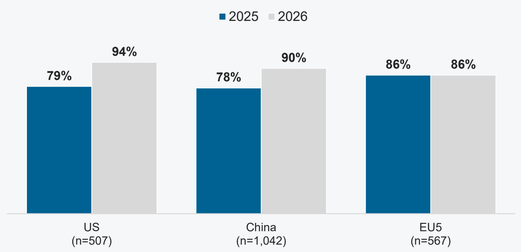
RESULTS

Across regions, treatment is anchored in renin-angiotensin-aldosterone system inhibitors (RAASi) and sodium-glucose cotransporter-2 inhibitors (SGLT2i), used in >85% of patients (FIGURE 1). However, use of targeted therapies is increasing, with 41% of US and 33% of China patients now treated with branded agents. In EU5, adoption is growing but remains constrained by access (FIGURE 2). A structured treatment paradigm is emerging. Targeted budesonide, sparsentan, and/or atrasentan are used in earlier lines and in patients with lower disease severity, while agents such as iptacopan and sibeprenlimab are reserved for patients with more advanced or progressive disease. Targeted therapies are most commonly introduced in the second or third line but are increasingly used earlier in the disease course (FIGURE 3). Combination therapy is becoming standard, with most patients on targeted agents alongside RAASi and SGLT2i (FIGURE 4), and a majority of nephrologists agree the simultaneous use of new targeted therapies is necessary to reach treatment goals (FIGURE 5). Concurrently, systemic corticosteroid use is declining (-10% points in the US since 2022, -10% points in China and -3% points in EU5 since 2023) (FIGURE 6). Despite treatment advances, a substantial proportion of patients remain above proteinuria targets (FIGURE 7), and nephrologists report strong interest in emerging therapies with novel mechanisms of action which are expected to further expand treatment options (FIGURE 8).

FIGURE 1

Foundational Therapy (RAASi/SGLT2i) Treatment Rates

% of patients

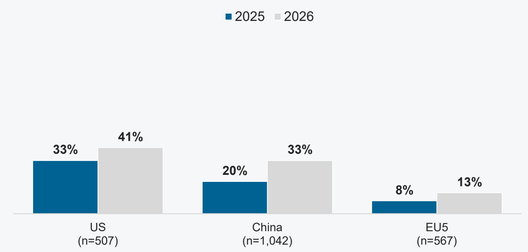


Source: Patient Chart Dynamix™: [IgAN (US, EU5, China), 2026]; 2026 n=507 US, 567 EU5, 1,042 China.

FIGURE 2

Targeted Therapy Treatment Rates

% of patients

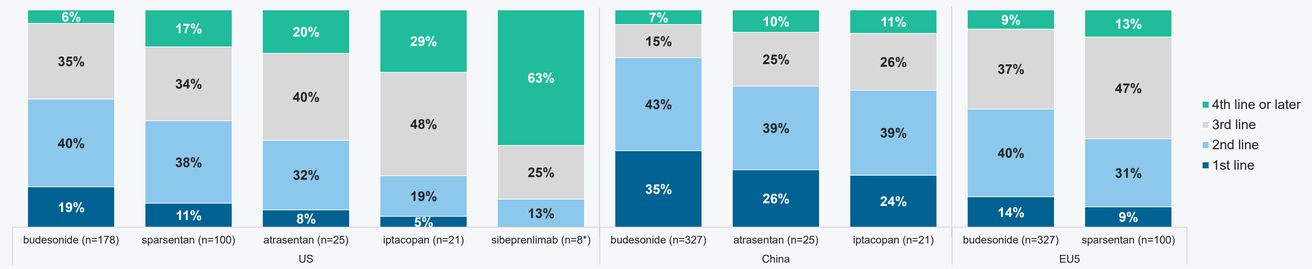


Source: Patient Chart Dynamix™: [IgAN (US, EU5, China), 2026]; 2026 n=507 US, 567 EU5, 1,042 China.

FIGURE 3

Ideal IgAN Step Therapy Approach

% of respondents



*Source: Patient Chart Dynamix™: [IgAN (US, EU5, China), 2026]; *small base, interpret with caution.*

FIGURE 4

Combination Therapy

% of patients on a branded therapy also on an SGLT2 inhibitor

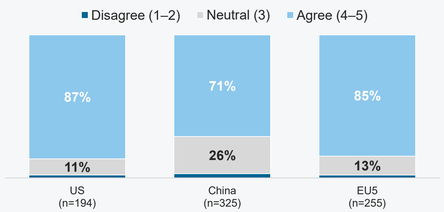
	Budesonide	Sparsentan	Iptacopan	Atrasentan	Sibeprenlimab
US (n=103, 87, 15*, 22, 8*)	86%	86%	67%	86%	50%
China (n=235, 225, 111)	62%		63%	61%	
EU5 (n=52, 30)	92%	97%			

*Source: Patient Chart Dynamix™: [IgAN (US, EU5, China), 2026]; *small base.*

FIGURE 5

"The simultaneous use of new targeted therapies for IgAN is necessary to reach the treatment goals proposed in the 2025 draft KDIGO guidelines"

% of respondents

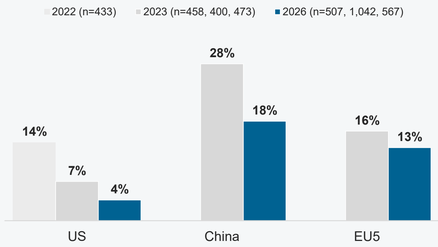


Source: Patient Chart Dynamix™: [IgAN (US, EU5, China), 2026].

FIGURE 6

Steroid Usage, Trended

% of patients currently prescribed

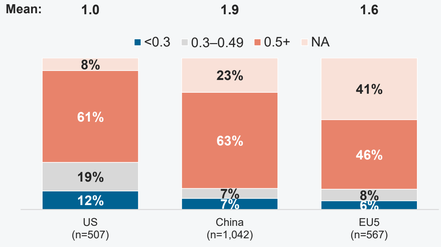


Source: Patient Chart Dynamix™: [IgAN (US, EU5, China), 2026].

FIGURE 7

Most Recent UPCR Value

% of patients

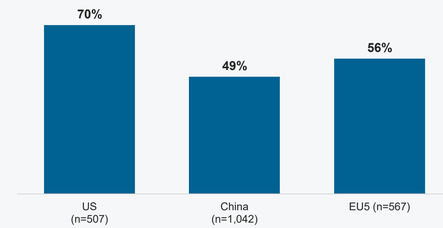


Source: Patient Chart Dynamix™: [IgAN (US, EU5, China), 2026].

FIGURE 8

MOA Preference

% ranking dual APRIL/BAFF inhibitor in top 3



Source: Patient Chart Dynamix™: [IgAN (US, EU5, China), 2026].

CONCLUSIONS

Treatment of IgAN is evolving toward earlier use of targeted therapies and increased use of combination regimens. While foundational therapies remain the standard of care, targeted agents are being incorporated based on disease severity and progression. Ongoing gaps in disease control highlight the need for additional treatment options.

POSTER DETAILS

ACKNOWLEDGMENTS

The Spherix Global Insights team wishes to express our appreciation to the nephrologists who participated in this research.

DISCLOSURES

Spherix Global Insights is an independent market intelligence and advisory firm that has not received any industry funding to conduct and report on this study.

REFERENCES

Spherix Global Insights. *Patient Chart Dynamix™: [IgAN (US, EU5, China), 2026].* Proprietary market research study.

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