

## **Project Summary for IgANN website**

### **Project Title**

Follow-up microscopic hematuria as a risk of progression in adults and children with IgA vasculitis nephritis (IgAVN).

### **Primary Investigators**

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### **Brief Description**

After being neglected for years, microscopic hematuria was rescued as a risk factor for progression of primary IgAN (1), which was confirmed by several studies (2-4). A recent review article reports the update on the value of microscopic hematuria to estimate IgAN activity and risk of progression and suggests considering this biomarker during the follow-up (5). Notably, the value of microscopic hematuria in renal non-IgA related vasculitis has also been recently reported (6). However, the value of persistent microscopic hematuria on IgAVN outcomes has not been previously investigated and it is the aim the present project. This study is based on the database collected for the IgANN research on IgAVN (7) with some updates. Statistical analysis will be performed in the Mayo Clinic.

A letter was sent to be assured that each center approved the use of their stored data: a positive answer was received from all the centers. Moreover, some updates were requested and obtained reaching a final cohort of 493 cases of IgAVN with MEST-C score and follow-up microscopic hematuria quantification. The shipment of the IgAVN database from Vancouver to Rochester is at the final steps. Data from the original database should be available at Mayo by June 2024 for statistical analysis.

### **References**

- 1) Sevillano et al JASN 2017; 28: 33089-3099
- 2) Coppo R and Fervenza F JASN 2017; 28:2831-2834
- 3) Bobart S et al NDT 2021; 26:36:840-847
- 4) El Karoui K, Fervenza FC, De Vriese AS. J Am Soc Nephrol. 2024;35:103-116.
- 5) Zand L, Fervenza FC, Coppo R. Clin Kidney J. 2023 Dec 4;16(Suppl 2):ii19-ii27.
- 6) Benichou N, et al French Vasculitis Study Group (FVSG) and European Vasculitis Society (EUVAS) investigators. Kidney Int. 2023; 103:1144-1155.
- 7) Barbour SJ, et al .Clin J Am Soc Nephrol. 2024;19:438-451.