WCN 2024 ALIGN Baseline

Title: Baseline characteristics of the ALIGN trial: a Phase 3 randomized, double-blind, placebo-controlled clinical trial of atrasentan in patients with IgAN

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Introduction

Endothelin A (ET_A) receptor activation drives proteinuria, kidney inflammation and fibrosis in IgA nephropathy (IgAN). Atrasentan, a potent and selective ET_A receptor antagonist, is a potential therapy to reduce proteinuria and preserve kidney function in patients with IgAN. Interim results from the IgAN cohort of the open-label AFFINITY study demonstrated atrasentan was well tolerated and resulted in clinically meaningful proteinuria reductions at 12 and 24 weeks. The ongoing ALIGN study (NCT04573478) is a global, phase 3, randomized, double-blind, placebo-controlled clinical trial of atrasentan in patients with IgAN at high risk of kidney function loss. Demographics and baseline characteristics will be presented.

Methods

Eligibility criteria for the ALIGN study include biopsy-proven IgAN, total protein excretion ≥ 1 g/d, eGFR ≥30 mL/min/1.73 m^2 and receiving a maximally tolerated and stable dose of a renin-angiotensin system inhibitors (RASi). An additional stratum of patients also receiving a stable dose of sodium glucose cotransporter-2 inhibitors (SGLT2i) for at least 12 weeks are eligible. After randomization, patients

receive 0.75 mg atrasentan or placebo daily for 132 weeks. The primary outcome is proteinuria change from baseline to Week 36. Key secondary and exploratory endpoints include eGFR change from baseline to week 136, safety and tolerability, and quality of life.

Results

The pre-specified interim analysis population included the first 270 patients enrolled in the main stratum. An additional 64 patients were enrolled in the exploratory SGLT2i stratum. Demographics and baseline characteristics were similar across both strata and will be presented at the time of the conference.

Conclusion

The global ALIGN trial has recruited patients with IgAN that are representative of a typical IgAN patient population. The inclusion of patients receiving maximally tolerated RASi and a stratum of patients receiving SGLT2i in addition to RASi reflects the current treatment paradigm in IgAN. This trial is ongoing and will report results at a future date.

Category: The Smart Kidney: Genetics, precision medicine, machine learning/AI, rare/orphan kidney diseases

Subcategory: Clinical glomerulonephritis

Keywords: IgA nephropathy, glomerulonephritis, clinical trial