



Sparsentan for treating primary IgA nephropathy

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Sparsentan (Filspari) is available on the NHS as a possible treatment for primary immunoglobulin A (IgA) nephropathy in adults with:

- a urine protein-to-creatinine (UPCR) ratio of 85 mg/mmol or more, or
- 1 g or more of protein in their urine daily.

You should stop having sparsentan after 36 weeks if your UPCR:

- is 199 mg/mmol or more, and
- has not reduced by 20% or more since you started taking sparsentan.

Is this treatment right for me?

Your healthcare professionals should give you clear information, talk with you about your options and listen carefully to your views and concerns. Your family can be involved too, if you wish. See our webpage on making decisions about your care.

Questions to think about

- How well does it work compared with other treatments?
- · What are the risks or side effects? How likely are they?
- How will the treatment affect my day-to-day life?
- · What happens if the treatment does not work?
- What happens if I do not want to have treatment? Are there other treatments available?

Information and support

The NHS webpage on chronic kidney disease may be a good place to find out more.

These organisations can give you advice and support:

- Kidney Research UK, 0300 303 1100
- Kidney Care UK, 0808 801 0000

You can also get support from your local <u>Healthwatch</u>.

NICE is not responsible for the quality or accuracy of any information or advice provided by these organisations.

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