

Targeted-release budesonide for treating primary IgA nephropathy

Information for the public

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Targeted-release budesonide (Kinpeygo) is available on the NHS as a possible treatment for primary immunoglobulin A nephropathy (IgAN) in adults when:

- they have:
 - a urine protein-to-creatinine ratio of 90 mg/mmol or more or
 - 1 g or more of protein in their urine daily, and
- it is used alongside optimised standard care that includes, unless they cannot have them, either:
 - the highest tolerated licensed dose of renin-angiotensin system inhibitors, or
 - a dual endothelin angiotensin-receptor antagonist.

Optimised standard care is standard care that has been personalised to give the best possible results.

If you are not eligible for targeted-release budesonide but are already having it, you should be able to continue until you and your doctor decide when best to stop.

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 shared decision making](#).

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 00 00

You can also get support from your local [Healthwatch](#).

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