

Self-assessment questions: Evaluation and management of IgA nephropathy

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1 Regarding clinical presentation in IgA nephropathy (IgAN):

- (a) Recurrent episodes of macroscopic haematuria classically occur 1–2 weeks following an upper respiratory tract infection
- (b) Development of IgAN is related to high levels of circulating levels of IgA
- (c) Although sporadic instances of IgAN occur, IgAN is typically familial
- (d) Acute kidney injury is a rare manifestation which may be related to the toxic effects of haematuria on the renal tubules
- (e) IgAN may occur secondary to chronic liver disease or coeliac disease

2 A renal biopsy:

- (a) Is always required for diagnosis of IgAN
- (b) May not be necessary in cases of non-visible haematuria with preserved renal function and no proteinuria
- (c) Shows predominant mesangial deposition of IgA on immunofluorescent staining
- (d) During episodes of macroscopic haematuria may show the presence of crescents
- (e) Will always show abnormalities on light microscopy if there are IgA deposits

3 Regarding treatment of IgAN:

- (a) Proteinuria >1 g/day is associated with a worse renal prognosis and should be treated by renin-angiotensin system (RAS) blockade
- (b) A trial of corticosteroids may be considered in those with proteinuria who have failed to respond to maximal RAS blockade and blood pressure control
- (c) Mycophenolate mofetil has been shown to be of benefit in Caucasian patients
- (d) All patients with nephrotic syndrome and IgAN should be treated with corticosteroids
- (e) Results from randomised controlled trials suggest that crescentic IgAN should be treated with corticosteroids and cyclophosphamide

4 Prognosis in IgAN:

- (a) May be predicted by scoring using the Oxford Classification of pathological findings.
- (b) Is related to the extent of IgA glycosylation
- (c) Is improved by reducing proteinuria to <1 g/day
- (d) Is worse in those with recurrent episodes of visible haematuria
- (e) Recurrence of IgAN in transplant kidneys commonly causes transplant failure

Answers to these self-assessment questions can be found on page s92.