Rethink IgAN

# Key components of an IgA nephropathy care plan

Each part of your IgAN care plan is meant to help protect your remaining kidney function. Your nephrologist should help you create a personalized IgAN care plan that may include some of the components listed here. Be sure to check in with your nephrologist regularly to keep your plan on track.

## Lifestyle changes to support your kidneys

**Diet:** Your nephrologist may tell you to eat fresh foods, or watch how much salt, potassium, and protein you eat. They may also tell you to drink a set amount of water each day. This is so your kidneys don't get overloaded.

**Exercise and weight:** Your nephrologist may tell you to walk or do light exercises. They may also tell you to lose or stay at a healthy weight. This may help your kidneys work better.

**Stress relief:** Your IgAN care plan may include deep breathing, meditation, or talking with someone you trust. This could help lower stress and blood pressure.

## Monitoring your IgA nephropathy with lab tests

**Urine tests:** Regular checks to measure proteinuria (protein in urine) and hematuria (blood in urine) are often necessary. Urine tests can show your nephrologist how well your kidneys are working and whether there is active inflammation.

**eGFR (estimated glomerular filtration rate):** This blood test measures how well your kidneys filter waste. Tracking eGFR helps your nephrologist understand how your kidney function is changing over time.

**Blood tests for electrolytes and glucose:** These tests help identify imbalances that may affect how your kidneys are working.

## Supportive care

**Treatments that help manage blood pressure and fluid balance*:** These medicines ease stress on your remaining nephrons.

**Treatments that regulate blood sugar*:** If you have high blood sugar or diabetes, therapies to lower glucose may protect your kidneys from additional damage.

**Other treatments:** Your nephrologist may prescribe other therapies to manage your kidney disease as well.

*Note: Guidelines suggest using ACE inhibitors, ARBs, and SGLT2 inhibitors to help address proteinuria, even if you do not have high blood pressure or high blood sugar.

ACE inhibitors=angiotensin-converting enzyme (ACE) inhibitors; ARBs=angiotensin receptor blockers; IgAN=immunoglobulin A nephropathy; SGLT2 inhibitors=sodium-glucose cotransporter-2 (SGLT2) inhibitors

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