

TITLE: NEW TREATMENT FOR CHRONIC KIDNEY DISEASE BASED ON MINIMIZING ALBUMINURIA ADVERSE EFFECTS

FIELD OF INTEREST

Pharma, Biotechnology(Renal, Inflammation).

CLINICAL NEED

According to KDIGO (KIDNEY DISEASE IMPROVING GLOBAL OUTCOMES) Clinical Practice Guideline, Chronic Kidney Disease (CKD) may be classified by two parameters: Glomerular filtration rate and Albuminuria. Currently, there are two consecutive approaches for the treatment of CKD: 1) Regulation of Arterial Hypertension 2) Inhibition of the renin-angiotensin system (Angiotensin-converting enzyme inhibitors –ACEI- and angiotensin-II receptor blockers –ARBs-). However, ACEI inhibitors and ARBs slow but do not stop CKD progression, especially when there is residual albuminuria leading to tubular cell injury. Numerous clinical trials have searched for drugs that decrease this residual albuminuria, but most have failed or the effects on kidney function are unknown.

DESCRIPTION OF THE INVENTION

Targeting a specific protein involved in apoptosis, it has been possible to avoid tubular cell injury caused by residual albuminuria levels. This invention shifts the focus from decreasing albuminuria to decreasing the adverse kidney consequences of albuminuria, thus providing a novel therapeutic paradigm.

The present invention is complementary to conventional drugs commonly used in the clinical practice and overcomes the current medical disability for reducing residual albuminuria levels that persist after treatment with ACEI or ARBs. Basically, the invention, based on the inhibition of BASP-1 levels, prevents tubular cells from undergoing apoptosis caused by residual albuminuria levels in patients with Chronic Kidney Disease.

ADVANTAGES

TECHNOLOGY KEYWORDS

Genetic engineering, siRNA, Renal failure, Chronic Kidney Disease, BASP-1, Albuminuria.

IPR STATUS

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TYPE AND ROLE OF PARTNER

Looking for commercial partners interested in licensing.

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