CLAIMS

1. Use of a transmembrane activator and calcium modulator and cyclophilin ligand-interactor (TACI)-immunoglobulin (Ig) fusion molecule in the manufacture of a medicament for the treatment of IgA nephropathy (IgAN) in a patient, wherein the medicament is to be administered to the patient, wherein said TACI-Ig fusion molecule comprises:
   (i) a TACI extracellular domain or fragment thereof which binds BLyS (B Lymphocyte Stimulator) and/or APRIL (A Proliferation-Inducing Ligand); and
   (ii) a human immunoglobulin-constant domain.

2. Use of a transmembrane activator and calcium modulator and cyclophilin ligand-interactor (TACI)-immunoglobulin (Ig) fusion molecule in the manufacture of a medicament for the treatment of IgA nephropathy (IgAN) by reducing the serum Gd-IgA1 level in an IgAN patient, wherein the medicament is to be administered to the patient, wherein said TACI-Ig fusion molecule comprises:
   (i) a TACI extracellular domain or fragment thereof which binds BLyS (B Lymphocyte Stimulator) and/or APRIL (A Proliferation-Inducing Ligand); and
   (ii) a human immunoglobulin-constant domain;
   wherein said administration of said TACI-Ig fusion molecule results in a reduction in the patient's serum Gd-IgA1 level compared to before said administration of said TACI-Ig fusion molecule.

3. Use of a transmembrane activator and calcium modulator and cyclophilin ligand-interactor (TACI)-immunoglobulin (Ig) fusion molecule in the manufacture of a medicament for the treatment of IgA nephropathy (IgAN) by reducing the proteinuria in an IgAN patient, wherein the medicament is to be administered to the patient, wherein said TACI-Ig fusion molecule comprises:

(i) a TACI extracellular domain or fragment thereof which binds BLyS (B Lymphocyte Stimulator) and/or APRIL (A Proliferation-Inducing Ligand); and

(ii) a human immunoglobulin-constant domain;

wherein said administration of said TACI-Ig fusion molecule results in a reduction in proteinuria compared to before said administration of said TACI-Ig fusion molecule.

4. Use of a transmembrane activator and calcium modulator and cyclophilin ligand-interactor (TACI)-immunoglobulin (Ig) fusion molecule in the manufacture of a medicament for the treatment of IgA nephropathy (IgAN) by reducing the serum Gd-IgA1 level and the proteinuria in an IgAN patient , wherein the medicament is to be administered to the patient, wherein said TACI-Ig fusion molecule comprises:

(i) a TACI extracellular domain or fragment thereof which binds BLyS (B Lymphocyte Stimulator) and/or APRIL (A Proliferation-Inducing Ligand); and

(ii) a human immunoglobulin-constant domain;

wherein said administration of said TACI-Ig fusion molecule results in a reduction in the patient's serum Gd-IgA1 level compared to before said administration of said TACI-Ig fusion molecule; and

wherein said administration of said TACI-Ig fusion molecule results in a reduction in proteinuria compared to before said administration of said TACI-Ig fusion molecule.

5. The use according to any one of claims 1 to 4, wherein said patient has persistent proteinuria.

6. The use according to claim 5, wherein said persistent proteinuria is a persistent proteinuria of 1.0 to 6.0 g/day of total protein based on 24-hour urine collection.

7. The use according to claim 5 or 6, wherein

(a) said persistent proteinuria is a persistent proteinuria with a urine protein:creatinine ratio (UPCR) ≥ 1 mg/mg based on 24-hour urine collection or

(b) said persistent proteinuria is a persistent proteinuria with a UPCR ≥ 0.75 mg/mg based on 24-hour urine collection, wherein at least once within 12 months prior to said administration of said TACI-Ig fusion molecule said patient has been determined to have a UPCR ≥ 1 mg/mg based on 24-hour urine collection.

8. The use according to any one of claims 1 to 7, wherein said TACI-Ig fusion molecule has an amino acid sequence that is at least 80% identical to SEQ ID NO: 3.

9. The use according to any one of claims 1 to 8, wherein said TACI-Ig fusion molecule is atacicept.

10. The use according to any one of claims 1 to 9, wherein said patient has been treated with an angiotensin converting enzyme (ACE) inhibitor and/or angiotensin receptor blocker (ARB) for at least 8 weeks prior to said administration of said TACI-Ig fusion molecule.

11. The use according to any one of claims 1 to 10, wherein said IgA nephropathy is an IgA nephropathy confirmed by kidney biopsy.

12. The use according to any one of claims 1 to 11, wherein said TACI-Ig fusion molecule is to be administered in an amount of 25 to 150 mg per week.

13. The use according to any one of claims 1 to 12, wherein said TACI-Ig fusion molecule is to be administered for at least 4 weeks.

14. The use according to any one of claims 1 to 13, wherein said TACI-Ig fusion molecule is to be administered by subcutaneous administration.

15. The use according to claim 2 or claim 4, wherein the reduction in the serum Gd-IgA1 level compared to the situation before said administration of said TACI-Ig fusion molecule is a reduction by between 25% and 60%,

16. The use according to claim 2 or claim 4, wherein the reduction in the serum Gd-IgA1 level compared to the situation before said administration of said TACI-Ig fusion molecule is a reduction by at least 50%.

17. The use according to any one of claims 1 to 16, wherein human immunoglobulin-constant domain is modified for reduced complement-dependent cytotoxicity (CDC) and/or antibody-dependent cellular cytotoxicity (ADCC).

18. The use according to claim 5, wherein the patient has persistent proteinuria after having been treated with an ACE inhibitor and/or an ARB for at least 8 weeks prior to said administration of said TACI-Ig fusion molecule.

19. The use according to claim 18, wherein the patient continues to receive the treatment with the ACE inhibitor and/or the ARB during the administration of said TACI-Ig fusion molecule.

20. The use according to any one of claims 1 to 19, wherein concomitantly to said administration of said TACI-Ig fusion molecule at least one further medicament is to be administered to said patient, optionally wherein said at least one further medicament is selected from the group consisting of an angiotensin converting enzyme (ACE) inhibitor, an angiotensin receptor blocker (ARB), aspirin, an antihypertensive medication (preferably selected from the group consisting of a diuretic, an aldosterone antagonist, a calcium-channel blocker and a b-blocker), a statin, omega-3 fish oil and dipyridamole.

21. The use according to claim 7, wherein said administration of said TACI-Ig fusion molecule results in reduction in the 24-hour urine-protein: creatinine ratio (UPCR) of at least 15% based on 24-hour urine collection, compared to before said administration of said TACI-Ig fusion molecule.

22. The use according to claim 4, wherein said administration of said TACI-Ig fusion molecule results in a reduction in total protein in urine of said patient based on 24-hour urine collection by at least 15% compared to before said administration of said TACI-Ig fusion molecule.

23. The use according to any one of claims 1 to 22, wherein said administration of said TACI-Ig fusion molecule results in a reduction in a serum immunoglobulin of the patient, wherein optionally the serum immuglobulin comprises one of or a combination of two or more of IgA, IgG, and IgM.

24. The use according to any one of claims 1 to 23, wherein said administration of said TACI-Ig fusion molecule results in the Estimated Glomerular Filtration Rate (eGFR) of the patient decreasing by not more than 10%, the eGFR decreasing by not more than 5%, the eGFR not decreasing, the eGFR increasing by at least 5%, or the eGFR increasing by at least 10%.