



Vera Therapeutics Announces ORIGIN 3 Final Efficacy Analysis of TRUTAKNA™ (atacept-vymj) in IgA Nephropathy Will be A Featured Late-breaking Oral Presentation at the Opening Plenary Session of ASN Kidney Week 2026

Oct 2, 2026

BRISBANE, Calif., Oct. 02, 2026 (GLOBE NEWSWIRE) -- Vera Therapeutics, Inc. (Nasdaq: VERA), a commercial-stage biotechnology company, today announced that there will be multiple presentations at the American Society of Nephrology (ASN) Kidney Week 2026 in Denver, Colorado, from October 22 to 25. The final efficacy analysis of the ORIGIN 3 trial of TRUTAKNA in IgA nephropathy (IgAN) will be a featured late-breaking oral presentation during the opening plenary session and also a late-breaking research poster. In addition, interim results from the adult IgAN and primary membranous nephropathy (pMN) cohorts in PIONEER, a Phase 2 basket trial of atacept in multiple glomerular diseases, will be a late-breaking research oral presentation. In total, five Vera sponsored abstracts will be presented at ASN Kidney Week 2026, demonstrating the Company's commitment to transforming medicine in autoimmune kidney disease.

Vera Therapeutics Abstract Presentations at ASN Kidney Week 2026

Oral Presentations

Title	The ORIGIN 3 Trial of Atacept in IgA Nephropathy
Presenting Author	Jonathan Barratt, PhD, FRCP, Mayer Professor of Renal Medicine, University of Leicester
Abstract Number	TH-OR109
Session Title	Opening Plenary
Session Date, Time	Thursday, October 22, 8:00–9:30 AM MDT
Presentation Time	9:05–9:12 AM MDT
Location	Bluebird Ballroom, Convention Center
Supplementary Poster Session	Late-Breaking Research Posters, Thursday, October 22
Poster Board	TH-PO1257

Title	Interim Results from the Adult IgAN and Primary Membranous Nephropathy (pMN) Cohorts in the Atacept PIONEER Trial
Presenting Author	Richard Lafayette, MD, FACP, Professor of Medicine (Nephrology) and Director of the Glomerular Disease Center at Stanford University Medical Center
Abstract Number	SA-OR079
Session Title	Late-Breaking Research Orals: Pediatrics, Genetics, and Glomerular Diseases
Session Date, Time	Saturday, October 24, 4:30–6:00 PM MDT
Presentation Time	5:30–5:40 PM MDT
Location	Four Seasons Ballroom 2, Convention Center

Poster Presentations

Title	The PIONEER Trial: Expanding Evaluation of Atacept, a B-Cell-Activating Factor (BAFF) and A Proliferation-Inducing Ligand (APRIL) Inhibitor, to Pediatric Patients with IgAN
Presenting Author	Howard Trachtman, MD, University of Michigan
Session Date, Time	Saturday, October 24, 10:00 AM–12:00 PM MDT
Location	Exhibit Hall, Convention Center
Poster Board	INFO20-SA

Title	Rapid Progression in IgAN Despite Treatment: Real-World Evidence of Suboptimal Disease Control in the United States
Presenting Author	Damemarie Paul, DrPH, MPH, Vera Therapeutics

Session	Glomerular Diseases: Clinical, Outcomes, and Therapeutics Research – Other [PO1402-07]
Session Date, Time	Saturday, October 24, 10:00 AM–12:00 PM MDT
Location	Exhibit Hall, Convention Center
Poster Board	SA-PO0627

Title	Aurora: A Multi-Site Clinical Implementation Network for IgA Nephropathy
Presenting Author	Navdeep Tangri, MD, University of Manitoba
Session Date, Time	Saturday, October 24, 10:00 AM–12:00 PM MDT
Location	Exhibit Hall, Convention Center
Poster Board	INFO19-SA

TRUTAKNA (atacept-vymj) Indication

TRUTAKNA (atacept-vymj) is indicated to reduce proteinuria in adults with primary immunoglobulin A nephropathy (IgAN) at risk for disease progression.

This indication is approved under accelerated approval based on reduction of proteinuria. It has not been established whether TRUTAKNA slows kidney function decline over the long-term in patients with IgAN. Continued approval for this indication may be contingent upon verification and description of clinical benefit in a confirmatory clinical trial.

Important Safety Information

Contraindications: TRUTAKNA is contraindicated in patients with serious hypersensitivity to atacept-vymj or any excipients of TRUTAKNA.

Warnings and Precautions

Immunosuppression and Increased Risk of Infections: TRUTAKNA suppresses the immune system by reducing antibody production, which may increase the risk of infections. Patients with chronic infection or recurring infections may have an increased risk of serious infection. In clinical trials, infections were reported in 32% of TRUTAKNA patients compared with 28% of placebo patients.

Before initiating TRUTAKNA, assess patients for active infections. Delay TRUTAKNA administration in patients with active infection until the infection resolves or is adequately treated. Monitor patients for signs and symptoms of infection during treatment with TRUTAKNA. If a serious infection develops, consider interrupting TRUTAKNA until the infection is controlled.

The concomitant use of TRUTAKNA and other immune-modulating therapies has not been evaluated. Concomitant use of TRUTAKNA with drugs that affect the immune system, including systemic corticosteroids, may increase the risk of infection.

Immunosuppression and Immunization Risk: TRUTAKNA may interfere with the immune response to vaccines and increase the risk of infection from live vaccines. Prior to initiating treatment with TRUTAKNA, complete all age-appropriate immunizations. Live vaccines are not recommended within 30 days prior to initiation or during treatment with TRUTAKNA as safety of coadministration has not been established.

Adverse Reactions: The most common adverse reactions ($\geq 5\%$) in patients treated with TRUTAKNA and placebo, respectively, were infections (32% vs 28%) and local administration reactions (30% vs 5%). The most common infection was upper respiratory tract infection (12% vs 9%), and the most common local administration reactions were injection site reaction (19% vs 2%) and injection site erythema (6% vs 1%).

Use in Specific Populations

Pregnancy: Available data on TRUTAKNA used in pregnant women exposed during clinical trials are insufficient to evaluate for a drug-associated risk of major birth defects, miscarriage, or other adverse maternal or fetal outcomes.

Based on the mechanism of action, TRUTAKNA may cause immunosuppression in the in utero-exposed infant. Consider the potential clinical impact of TRUTAKNA exposure in infants exposed in utero. Pregnant women exposed to TRUTAKNA, or their healthcare provider, should report TRUTAKNA exposure by calling 1-833-633-8372.

Pediatric Use: The safety and effectiveness of TRUTAKNA in pediatric patients have not been established.

You may report side effects to the FDA at 1-800-FDA-1088 or www.fda.gov/medwatch. You may also report side effects to Vera Therapeutics at 1-833-MED-VERA or medinfo@veratx.com.

Please see full [Prescribing Information](#) for additional Important Safety Information.

About TRUTAKNA

TRUTAKNA, a B-cell activating factor (BAFF) and A proliferation-inducing ligand (APRIL) inhibitor, is a soluble recombinant fusion protein containing the human transmembrane activator and calcium-modulating cyclophilin ligand interactor (TACI) receptor that binds to the cytokines BAFF and APRIL.¹ BAFF and APRIL are key cytokines that activate B cells and drive IgAN pathophysiology. In IgAN, activated B cells produce both the antigen and associated antibodies that result in the production of damaging IgA immune complexes. The overlapping roles of BAFF and APRIL in activating B cells support the potential for TRUTAKNA as a disease-modifying therapy.² TRUTAKNA is self-administered as an at-home, small-volume (1 ml), 150 mg once-weekly autoinjector.

TRUTAKNA TRU SUPPORT™ Patient Support Program

We are dedicated to ensuring that eligible IgAN patients can access the first approved therapy that targets both BAFF and APRIL. TRUTAKNA TRU SUPPORT, our patient support program, offers insurance coverage assistance, financial assistance options for eligible patients, and educational resources designed to support patient access and care. Eligible commercially insured patients may pay as little as \$0 out of pocket through our copay assistance program. More information will be available on www.veratx.com.

About IgAN

IgAN is a serious, progressive, immune-mediated kidney disease and a leading cause of chronic kidney disease and kidney failure worldwide.^{3,4} Approximately 2.5 adults per 100,000 worldwide are diagnosed with IgAN each year, most often between 30 and 40 years of age.^{5,6} Over time, IgAN can lead to irreversible kidney damage and may ultimately require dialysis or kidney transplantation. At least 50% of patients may progress to kidney failure or death within 10 to 20 years of diagnosis.³

About Vera Therapeutics

Vera Therapeutics is a commercial-stage biotechnology company focused on the pursuit of truth in science to transform medicine in autoimmune disease, starting with the kidney. Vera Therapeutics' flagship commercial product is TRUTAKNA (atacept-vymj), a BAFF and APRIL inhibitor indicated to reduce proteinuria in adults with primary IgA nephropathy at risk for disease progression. Beyond IgAN, Vera Therapeutics is evaluating additional diseases where the reduction of autoantibodies through inhibition of BAFF and APRIL may prove clinically meaningful. Vera Therapeutics was founded in 2016 and is based in Brisbane, California. To learn more, visit www.veratx.com.

Forward-looking Statements

Statements contained in this press release regarding matters, events or results that may occur in the future are "forward-looking statements" within the meaning of the Private Securities Litigation Reform Act of 1995. Such forward-looking statements include statements regarding, among other things, the potential for TRUTAKNA as a disease-modifying therapy; Vera Therapeutics' commitment to transforming medicine in autoimmune kidney disease; and the plans, commitments, aspirations and goals under the caption "About Vera Therapeutics". Words such as "anticipate," "believe," "expect," "may," "plan," "potential," "will" and similar expressions are intended to identify forward-looking statements. These forward-looking statements are based upon Vera Therapeutics' current expectations and involve assumptions that may never materialize or may prove to be incorrect. Actual results could differ materially from those anticipated in such forward-looking statements as a result of various risks and uncertainties, which include, without limitation, risks related to the regulatory approval process, risks related to commercial launch, market acceptance, and payer coverage, results of earlier clinical trials may not be obtained in later clinical trials, preliminary results may not be predictive of topline results, risks and uncertainties associated with Vera Therapeutics' business in general, the impact of macroeconomic and geopolitical events, and the other risks described in Vera Therapeutics' filings with the U.S. Securities and Exchange Commission. All forward-looking statements contained in this press release speak only as of the date on which they were made and are based on management's assumptions and estimates as of such date. Vera Therapeutics undertakes no obligation to update such statements to reflect events that occur or circumstances that exist after the date on which they were made, except as required by law.

References

1. TRUTAKNA™ [Prescribing Information]. Brisbane, CA: Vera Therapeutics, Inc; July 2026
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3. Pitcher D, Braddon F, Hendry B, et al. Long-Term Outcomes in IgA Nephropathy. *Clin J Am Soc Nephrol*. 2023;18(6):727-738. doi:10.2215/CJN.0000000000000135
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