

MICROSCOPIC POLYANGIITIS

WHAT IS MICROSCOPIC POLYANGIITIS?

Microscopic polyangiitis (MPA) is an uncommon disease. It is the result of blood vessel inflammation (vasculitis), which can damage organ systems. The areas most commonly affected by MPA include the kidneys, lung, nerves, skin, and joints. Over 90% of those with MPA have the disease in their kidney and it is indistinguishable from the kidney disease that patients with classic Granulomatosis with polyangiitis (GPA) (formerly Wegener's granulomatosis) often have. The main difference between MPA and GPA is that MPA does not have a particular type of inflammation—granulomatous inflammation.

SYMPTOMS

Because many different organ systems may be involved, a wide range of symptoms and signs are possible in MPA. Patients who have MPA may feel generally ill and fatigued, have fever, or have loss of appetite and weight. They usually also have symptoms related to areas of involvement such as rashes, muscle and/or joint pain. When MPA affects the lungs they may have shortness of breath or coughing up of blood. MPA affecting the nerves may cause an abnormal sensation followed by numbness or loss of strength. Any combination of these symptoms may be present. Kidney disease caused by MPA often does not produce symptoms. Inflammation of the kidney may not be apparent to the patient until the kidneys begin to stop working.

TREATMENT

Medications that suppress the immune system form the foundation of treatment for MPA. There are a variety of immunosuppressive medications that are used in MPA. People with MPA who have critical organ system involvement are generally treated with corticosteroids combined with another immunosuppressive medication such as cyclophosphamide (Cytoxan®) or rituximab (Rituxan®). In patients who have less severe MPA, corticosteroids and methotrexate can be used initially.