

IL15RA Report

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Introduction to IL15RA

Interleukin-15 Receptor Subunit Alpha (IL15RA) is a critical component of the immune system's signaling network, acting as the high-affinity receptor for the pro-inflammatory cytokine Interleukin-15 (IL-15). IL15RA plays a central, multifaceted role in coupling IL-15 cytokine signals to diverse cellular functions across both immune and non-immune tissues. Its expression is particularly notable on CD8+ T cells, Natural Killer (NK) cells, and within skeletal muscle and joint tissues. Dysregulation or genetic variation within the **IL15RA gene is closely associated with chronic inflammation, autoimmune conditions, and neuropathic pain syndromes**, making it a critical biomarker in advanced clinical evaluations, such as the MaxGen Comprehensive Cytokine DRP Panel.

Signs, Symptoms, and Associated Diseases

Clinically, aberrant IL15RA signaling and elevated IL-15 levels present with a broad spectrum of inflammatory and pain-related symptoms. Patients frequently report chronic, intractable joint pain, swelling, muscle fatigue, and neuropathic pain-like symptoms (NP). In the context of early-stage osteoarthritis (OA), increased IL-15 in joint fluids stimulates the release of damaging proteases (like MMP-1 and MMP-3), which drive localized inflammation and severe neuropathic pain, even in the absence of severe radiographic structural damage.

Beyond osteoarthritis, IL15RA hyperactivation is implicated in a variety of systemic and autoimmune diseases. It plays a significant role in rheumatoid arthritis (driving synovial hyperplasia and joint destruction), psoriasiform diseases (mediating skin inflammation), and sarcoidosis. Genetic variations in the IL15RA gene (such as rs2228059 and rs7097780) have been directly correlated with an increased risk of developing symptomatic osteoarthritis and post-surgical neuropathic pain. Furthermore, IL15RA expression influences skeletal muscle physiology; pathological signaling can contribute to inflammatory muscle atrophy and severe chronic fatigue, hallmark symptoms commonly observed in fibromyalgia and systemic inflammatory syndromes.

Conventional Treatments, Biologicals, and Considerations

Traditional allopathic management of IL15RA-mediated disorders typically involves attempting to suppress the downstream inflammatory cascade. Non-steroidal anti-inflammatory drugs (NSAIDs) such as indomethacin, alongside localized

corticosteroid injections, are frequently utilized as first-line therapies to mitigate joint swelling and pain. However, these offer only symptomatic relief and fail to address the root-cause cytokine dysregulation.

In cases of severe, refractory autoimmune disease, advanced biological therapies targeting the IL-15/IL15RA axis have been developed and utilized. These include experimental and off-label monoclonal antibodies (e.g., AMG 714) and therapies utilizing soluble IL-15 receptor alpha (sIL-15R α) as a decoy antagonist to dampen pro-inflammatory cytokine production. While highly effective at quenching severe inflammatory cascades, these biologicals carry significant drawbacks. The financial burden is immense, with annual costs frequently ranging from \$20,000 to over \$50,000. Additionally, because they broadly suppress immune function, patients face a heightened risk of serious opportunistic infections, upper respiratory tract infections, severe fatigue, and localized injection-site reactions.

The VARS Triad: A Natural Adjuvant and Stand-Alone Therapy

For patients desiring potent, natural options without the heavy side-effect profile of systemic immunosuppressants, the VARS Triad (also known as the REDOX Triad) offers a groundbreaking, root-cause approach. Developed and patented to address the precise biochemical bottlenecks that drive unchecked cytokine storms, VARS stands for Validated, Absorbable, Reduced, and Stable. The protocol consists of three synergistic, physician-designed master antioxidants: VARS Glutathione, VARS SOD (Superoxide Dismutase sourced from deep-sea algae), and VARS Catalase (a potent Nrf2 activator).

The VARS Triad functions by quenching the severe oxidative stress that upregulates IL15RA and other pro-inflammatory cytokines. In patients with chronic inflammation, fibromyalgia, or genetic vulnerabilities (such as MTHFR and transsulfuration pathway SNPs causing high homocysteine), the natural production of intracellular glutathione and catalase is often drastically impaired. By supplying these critical antioxidants in a highly absorbable, stable format, the VARS Triad restores the body's natural redox balance at the mitochondrial level. As a stand-alone therapy or an adjuvant to conservative treatments, the VARS Triad effectively quiets the inflammatory cascade, reducing the neuropathic pain, muscle fatigue, and systemic swelling associated with IL15RA dysregulation, all while promoting cellular recovery and avoiding the risks of biological immunosuppression.

Diagrams

Diagram 1 – Disease Overview & Attack on Key Body Parts

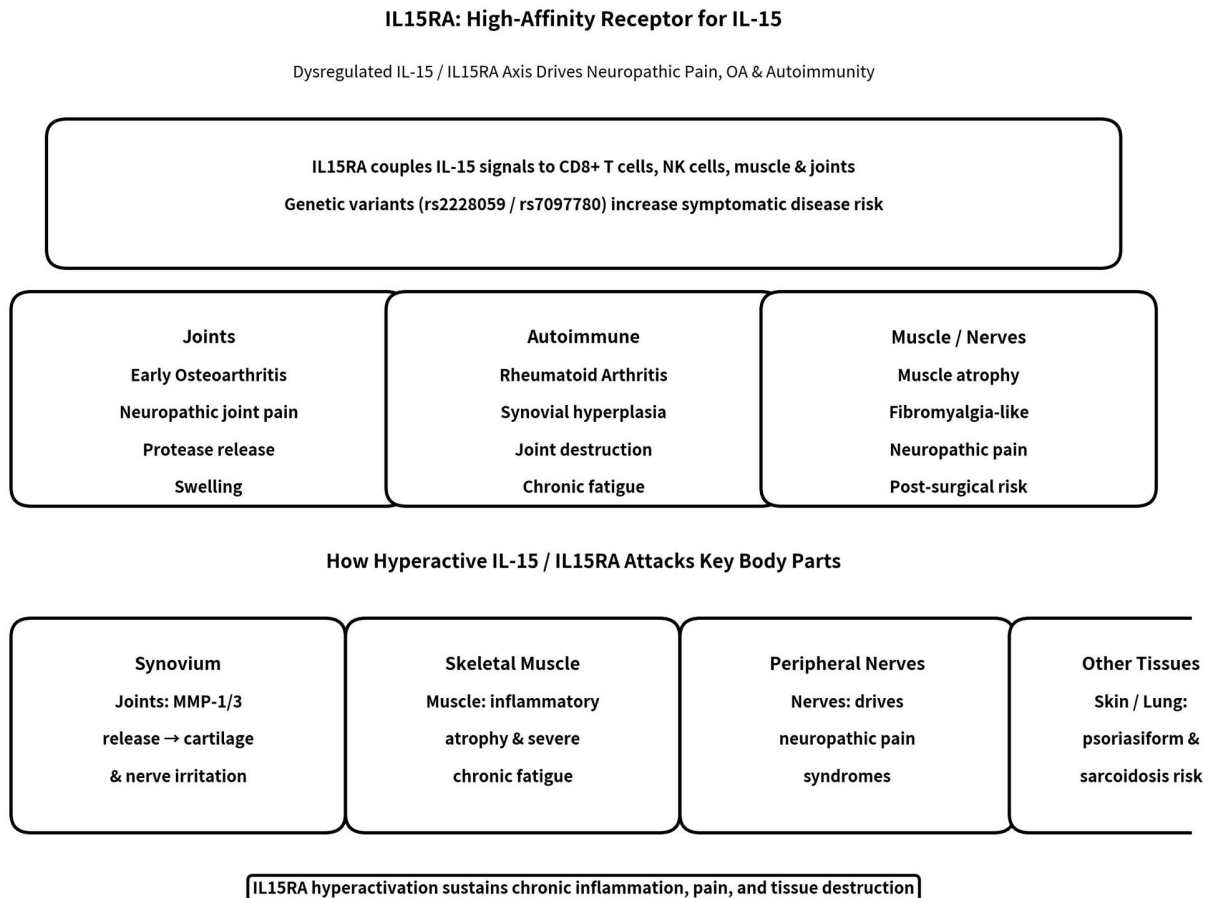
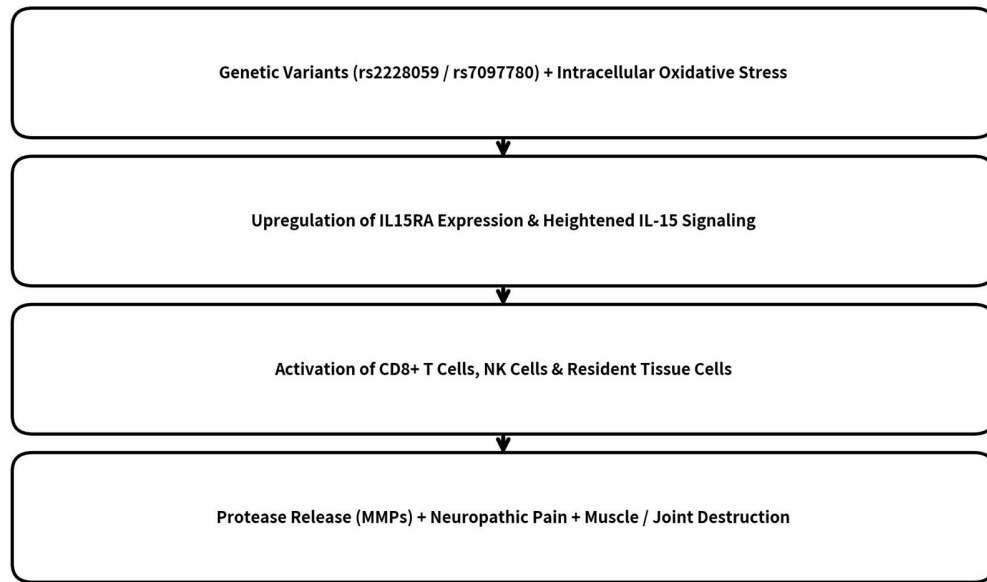


Diagram 2 – How Oxidative Stress & Genetics Drive IL15RA Pathogenicity

How Oxidative Stress & Genetics Drive IL15RA Pathogenicity

ROS Upregulates the IL-15 / IL15RA Axis → Tissue Damage & Neuropathic Pain

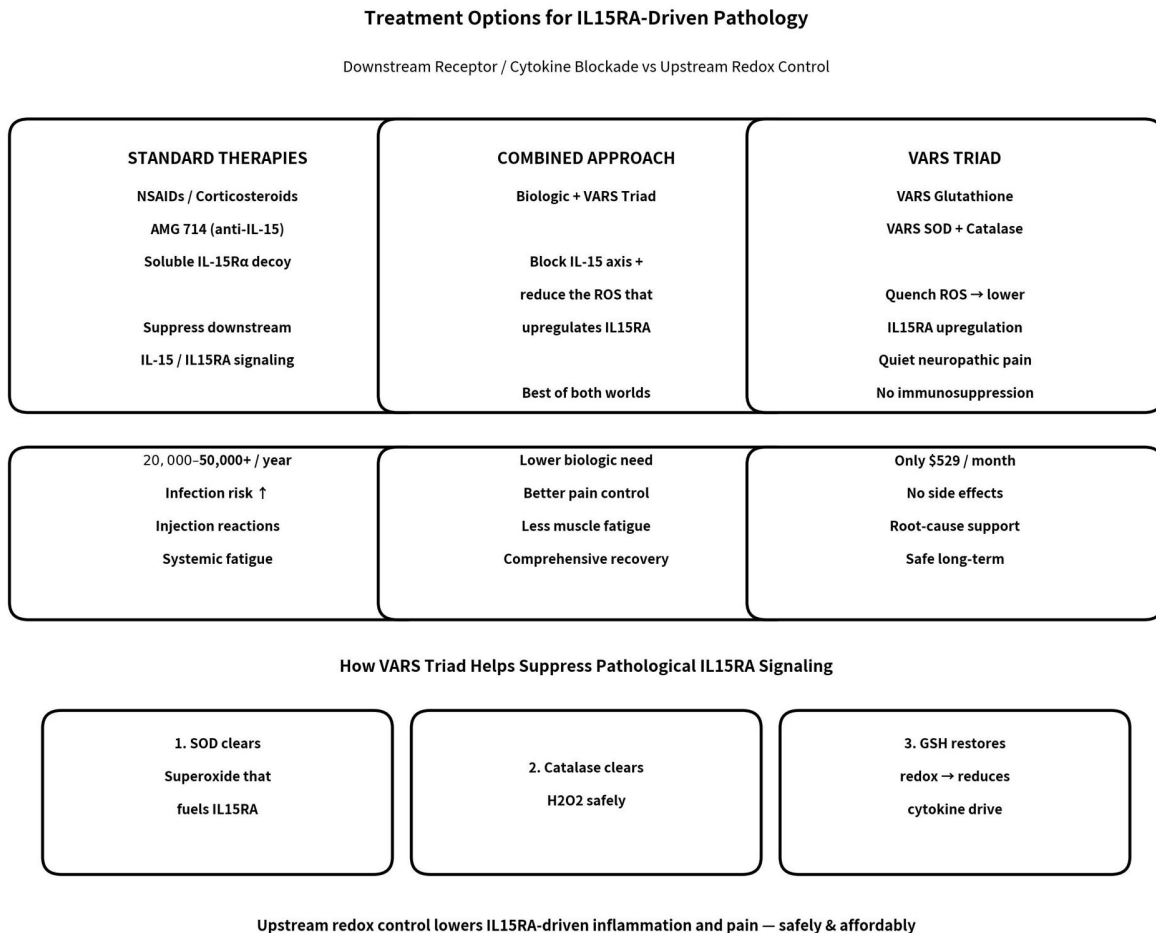


ROOT DRIVER

Oxidative stress and genetic variants keep the IL-15 / IL15RA axis chronically activated

This produces persistent joint pain, muscle fatigue, and autoimmune tissue damage

Diagram 3 – Treatment Options + VARS Triad Mechanism



References

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10-Word Description (MaxGen Comprehensive Cytokine DRP Panel)

Receptor driving neuropathic pain, osteoarthritis, fatigue, and chronic autoimmune inflammation.