

NEWS

ISN

ISN NEWS 47 November 2013

0 by 25: an ISN human rights initiative

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EDITORIAL

A bold statement for the future

Nobody in emerging countries should die of acute kidney failure (AKF) by 2025. This is the clear and defined announcement that ISN is making today - calling on its members to work together to build more health equality worldwide.

Most of the time, AKF is preventable and treatable with few if any long-term health consequences. It is in emerging countries where the challenge resides. A difficulty in catching the disease early and a lack of data means that patients in these regions cannot get care before it is too late.

In the following pages, you will read more about the challenges of AKF, discover more about each step of this strategic initiative, and see what we are already doing to make this disease a thing of the past.

The ISN Global Outreach and the Saving Young Lives Programs have already made substantial steps to improve awareness, training and gather data. Teaching doctors about the basics of peritoneal dialysis is key to developing a short-term solution, and making treatment more affordable. We believe that with our experience in training doctors and raising awareness about the different issues within nephrology, we can start making this statement a reality.

We hope you enjoy this special edition of ISN News focusing on this exciting initiative. This is one of the many ways we can make a difference and advance nephrology worldwide.

ISN President Giuseppe Remuzzi



Giuseppe Remuzzi is currently Professor of Nephrology and Director of the Department of Medicine as well as of the Department of Immunology and Clinical Transplantation of the Ospedale Papa Giovanni XXIII, Bergamo, Italy.

He is Director of the Unit of Nephrology and Dialysis of the same hospital and directs the Negri Bergamo Laboratories and the Clinical Research Center for Rare Diseases "Aldo e Cele Daccò" of the IRCCS Mario Negri Institute for Pharmacological Research. This group of scientists and clinicians are devoted to the study of renal disease, with particular focus on progression of renal disease and transplant immunology and tolerance.

ISN News

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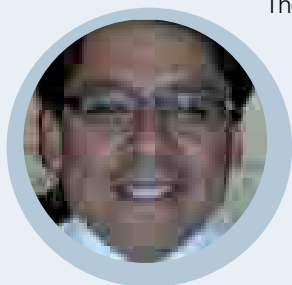
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News in brief

ISN member becomes advisor to Health Ministry in Bolivia



The Bolivian Ministry of Health recently appointed Raúl Plata-Cornejo as advisor for the National Renal Health Program (Programa Nacional de Salud Renal).

He is one of the founders of the Institute of Nephrology in Bolivia, a project he started as an ISN GO Fellow in 1992. There are now many stories like these resulting from the ISN Global Outreach (GO) Programs. He says:

"My principal objective is to transfer our 21 years experience of developing renal disease programs to Bolivian health reality."

A second objective for Raúl Plata-Cornejo is to establish specific prevention programs for kidney disease and provide an opportunity with renal telehealth follow-up programs to prevent or delay its progression and decrease morbidity and mortality.

"This will help reduce the exponential growth of end stage renal diseases in Bolivia, where 60% of the population has no real possibility of access to the main cities where nephrology centers are concentrated," adds Plata-Cornejo.

"My principal objective is to transfer our 21 years experience of developing renal disease programs to Bolivian health reality."

Raúl Plata-Cornejo

Prince Daniel of Sweden is a patron of the ISN

HRH Prince Daniel of Sweden has graciously agreed to be Royal Patron of ISN for the period 2013 - 2016. He has a strong personal interest in kidney disease and global issues in kidney health because he himself is a kidney transplant recipient. We look forward to working with him in raising awareness about kidney disease and transplantation.



Membership

ISN membership - make a difference

ISN connects science and humanitarian efforts. Through education, ISN is reaching out to global medical communities, giving them the knowledge and support to reduce the impact of kidney disease worldwide. Membership to ISN supports these activities and provides specific benefits including exclusive eligibility for ISN capacity building programs, online and print subscriptions to *Kidney International* and access to *Nature Reviews Nephrology* online and reduced registration fees to ISN events.

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Access or update your profile at:
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0 by 25 - a human right case for health equity

ISN puts focused effort into dramatically curtailing acute kidney failure associated mortality - improving health outcomes globally, especially in emerging countries.

Acute kidney failure (AKF) is a major problem in the industrialized and emerging world. While its incidence and etiology have been studied in industrialized countries, similar information is not available in emerging countries.

The 0 by 25 initiative puts forward a human right case statement that 0 people should die of untreated AKF in the poorest parts of Africa, Asia, South America by 2025.

Heading this challenge alongside the ISN Acute Kidney Injury Committee and the Clinical Trials Committee, ISN President Giuseppe Remuzzi says: "Initially, we will seek to gather primary information on the magnitude of the problem and its distribution among resource poor societies. Then building on this database, we will develop pilot programs in selected regions to establish a locally-coherent and detailed plan to prevent, diagnose and treat AKF."

What is happening today in emerging countries?

In less developed nations, AKF is common and is generally a disease of the young. In Nigeria, 46% of patients are less than 40 years old. In India, the average age is 34 according to a study.

Children are also often affected, making up 15% of patients. The impact of the disease on the young has important socio-economic repercussions. AKF often affects rural male workers at their most productive stage of life, with consequences on work and family life. In women the most common cause is due to limited care during pregnancy and delivery. The average risk of dying from pregnancy-related causes is 1 in 20 in low-resource regions and 1 in 2,000 in industrialized nations.

However, in many cases AKF is preventable and treatable with few if any long-term health consequences. Gravity-driven peritoneal dialysis (PD) is one way of treating patients without the need for complex equipment. This reduces costs and is a less complex procedure in an acute low-resource setting compared to automated PD or hemodialysis.

Developing a PD treatment program is already a short-term and relatively affordable service that is urgently required. Remuzzi explains: "Lessons learned from the ISN Saving Young Lives program in Tanzania at the Kilimanjaro Christian Medical Center have shown that this treatment leads to optimal results and PD for AKF has favorable outcomes."

Together, making this dream a reality

There is much goodwill in the international nephrology community to assist in developing AKF programs. After all, ISN is about sharing knowledge about prevention. Talking at this year's World Congress of Nephrology, Chief Editor of the Lancet Richard Horton said: "Doctors can no longer remain silent, leaving advocacy to a small group of medical politicians. Doctors cannot assume that they have either the trust of the public or the support of governments unless they are willing to take part in the public debate about what kind of society they want for the sick and impoverished."





ISN Acute Kidney Injury Committee on 0 by 25

By Ravindra Mehta (Chair of the ISN AKI Committee)

broader vision about how the private and public sector can work together, providing and funding primary-care services and strategies to ensure all citizens, including the most impoverished, have reliable and affordable methods of gaining access to life-saving care.

Remuzzi believes that: "We will develop a broad and comprehensive overall sustainable strategy to prevent, diagnose and treat AKF in resource-poor areas worldwide."

The outline of the proposal will involve four approaches:

- Make an appraisal of nephrology services globally, country by country, detailing the unmet need of patients worldwide. Decide indicators for nephrology services to use, gather the data and verify its reliability and finally interpret data and devise recommendations and messages.
- Develop strategies to prevent, diagnose and initiate treatment for AKF, including training health workers in remote areas, developing necessary reliable, affordable and cost-effective laboratory/technical resources and telecommunications; assistance in both local health centers and regional treatment centers.
- Develop strategies to reduce the incidence of AKF for selected causes.
- Develop strategies to reduce the mortality and complications related to AKF, with a particular emphasis on peritoneal dialysis support.



The Global Burden of AKF is

13.3 million a year.

In industrialized countries it is 2 million a year and 11.3 million in emerging countries.

AKF contributes to **1.7 million death/year.**

From this figure, 300,000/year stem from industrialized countries and 1.4 million/year from low and emerging countries.

One of the projects for the ISN AKI Committee in 2013-2014 is to develop a strategy for raising awareness for AKI. Several recent publications from the UK NCEPOD survey and the USRDS reports have highlighted several deficiencies and wide variations in caring for AKI patients worldwide. These reports have emphasized the need for early recognition, comprehensive management and follow up as essential elements to improve outcomes from this disease.

Recognizing knowledge gaps, a subcommittee of the ISN AKI committee including Andrew Lewington, Jorge Cerda, and Ravindra Mehta (Chair) will develop an overall strategy for raising awareness of AKI and define materials that would be needed for this purpose.

The links between AKI and chronic kidney disease (CKD) are being increasingly recognized in further defining the potential role of AKI as a modifiable risk factor for CKD and end stage renal disease. Despite this emerging data and wide interest in AKI, there is still a considerable lack of understanding among physicians and allied personnel and almost no information has been developed for the lay public.

Consequently, there are very limited systematic efforts and resources allocated to inform healthcare professionals and the public of its importance as a preventable and treatable disease that is distributed worldwide across patient populations and various disease groups.

ISN Forefronts Symposium Intrinsic Regulation of Kidney Function

March 6-9 2014
Charleston SC USA

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IN NEPHROLOGY

www.isnforefronts.org/charleston

Advancing Nephrology Around the World



Saving Young Lives Project

Going to Ghana to train nurses on basic principles of PD.

This summer, the Saving Young Lives (SYL) project organized its first training session in Ghana, in the centers of Accra and Kumasi. The Saving Young Lives project is a partnership between ISN, International Pediatric Nephrology Association (IPNA), International Society of Peritoneal Dialysis (ISPD) and Sustainable Kidney Care Foundation (SKCF). It seeks to develop acute peritoneal dialysis programs in hospital centers across Africa and South East Asia.

This training course in Ghana helped nurses and other healthcare professionals understand the basic principles of Peritoneal Dialysis (PD). Seth Johnson, from the Renal Research Institute/SCKF, flew to Ghana for two weeks. First, he visited the Komfo Anokye Teaching Hospital in Kumasi, where a PD unit has been well established for a couple of years, led by Sampson Antwi. This center in Kumasi is now hoping to become a regional center of training and education on AKF and PD for young children.

He also visited the Korle Bu Teaching Hospital in Accra, where a peritoneal dialysis unit is being set up, led by pediatric nephrologist Victoria Adabayeri. Johnson has trained a number of nurses, mixing theory and practice and troubleshooting complications. He also taught them the principles of infection prevention and hand hygiene. Medical residents, interns, pharmacists, and a surgeon also attended the training sessions.

The level of enthusiasm and commitment was very high. Participants were “hungry” for information and willing to learn and practice the learned skills. One staff nurse writes, “It is now becoming evident that PD is possible and achievable in our setting.”

Johnson testifies: “The level of readiness and enthusiasm among participants was great, and that made the program worthwhile.”

Last year, several programs kicked off in Ghana, Tanzania, Benin and more recently, Ethiopia and Uganda. The program focuses on educating and training staff within the hospital centers. The aim is to bring the educational resources to the doorstep of local medical professionals and help them provide much needed care to patients with AKF.

Visiting patients.



Seth Johnson handing out an award during his visit.



Group photo with the nurses



For more information on the ISN Saving Young Lives Project, visit:
www.theisn.org/syl

Focus on India

ISN Fellowship makes for better pediatric kidney care in India.



Pediatric nephrology is an emerging specialty in India.

Children with kidney problems often don't get timely treatment. Their parents are either unaware of their condition or cannot afford the cost of treatment. ISN is trying to respond to these issues by offering its members the chance to carry out their fellowship in a developed country. By sharing what they know doctors can strike the balance in kidney care worldwide.

Susan Uthup from the SAT Hospital Government Medical College in Thiruvananthapuram took part in the Fellowship Program, spending six months in the pediatric nephrology unit at the Cincinnati Children's Hospital Medical Center (CCHMC). She shares how she hopes to improve clinical nephrology services for children locally especially by offering Continuous Renal Replacement Therapy (CRRT) for younger patients.

She explains: "Pediatric Nephrology is an evolving specialty in my state. Pediatric dialysis, CRRT and transplantation are still in the primitive phase. These modalities are possible only in bigger children. Smaller children, especially those weighing less than 15 kg, are given only conservative management in End Stage Renal Disease (ESRD)."

The fetal ESRD program at CCHMC was an eye-opener. She adds: "I will try to coordinate and develop a pediatric nephro-urology team to provide more advanced care including transplantation in small children. Developing a pediatric nephrology center of excellence in my institution is a mission to be accomplished. The fellowship program has not only helped improve the quality of work in my unit but has also helped to offer postgraduate clinical hands-on training."

The pediatric nephrology unit at SAT Hospital Government Medical College is the first and only one of its kind caring for young kidney patients throughout Kerala state, India. Susan is the only qualified nephrologist in the unit, giving comprehensive care for young patients suffering from acute and chronic kidney disease including peritoneal and hemodialysis. The center has no expertise in CRRT, hemodialysis and transplantation for patients below 5 years old.

"I am really thankful to ISN for giving me this wonderful opportunity to broaden my perspective in pediatric nephrology. Cincinnati Children's Hospital Medical Center being the 3rd best pediatric nephrology center in US, I learned the latest developments in clinical pediatric nephrology, transplantation and dialysis in children," she adds.

Being an ISN Fellow helps build ties for the future in the hope of advancing care in the long term. Susan hopes to work with Prasad Devarajan, Professor of Pediatrics and Developmental Biology at Cincinnati Children's Research Foundation, a pioneer in biomarker development in acute kidney failure. "The pediatric urology division at CCHMC carries out pioneer work on children with CAKUT. I want to familiarize myself with renoprotection and optimum bladder management given to children with spinal dysraphism."

Voices of the ISN Programs

ISN Educational Ambassadors and their hosts share their thoughts on the program and how it has helped them advance kidney care locally.

Developing new relationships with nephrologists in Ukraine

ISN Educational Ambassadors have the potential to facilitate direct personal teaching and allow for the development of constructive collaborative relationships between nephrologists in the emerging world and more economically developed nations. Ideally, the relationships developed by the visit will provide continued mentoring in this host institution.

“The most rewarding aspect of this visit was seeing communication between professionals from different countries. We gathered some 30 participants to this course including nephrologists, renal pathologists and anesthesiologists. Among the topics, talks focused on the timing, intensity and modalities of Renal Replacement Therapy in acute kidney failure (AKF) and the relationship between CKD and AKF as well as case discussions related to AKF and acute dialysis”, says Mykola Kolesnyk from Institute of Nephrology of National Academy of Medical Sciences Ukraine.

Moving towards establishing international best practices in renal pathology in Nigeria

The program has had a huge impact on professionals in developing countries by providing the opportunity for them to connect. “I am very hopeful that this ISN EAP will be able to further support this mission and help the Renal Clinico-Pathology Study Group, University College Hospital, Ibadan build a kidney pathology service”, says EAP Vanessa Bijol from Boston Brigham and Women’s Hospital.

“This program helps improve clinical services and potentially patient outcomes and leads to improving the quality of the local nephrology training and research. Now, we are more enlightened and hopeful that our objectives of starting a renal immunofluorescence microscopy testing will be met.”

Paul Palevsky (4th from left) and Mykola Kolesnyk (6th from left) visiting the local hospital.



Host: Adanze Asinobi from University College Hospital Ibadan, Nigeria



World Kidney Day 2014: what are you planning?

Raising awareness about chronic kidney disease and aging.



Egypt



Malaysia



Bangladesh



Australia



The next World Kidney Day (WKD) will be held on Thursday March 13, 2014 and will focus on Chronic Kidney Disease (CKD) and the ageing population. About 1 in 10 people have some degree of CKD. It can develop at any age, but it gets increasingly common in older age. After 40, kidney function begins to fall by about 1% a year. Aside from this natural aging process, many conditions, which damage the kidneys, are more common in older people including diabetes and high blood pressure.

It is estimated that about one in five men and one in four women between the ages of 65 and 74, and half of people aged 75 or more have some degree of CKD. Simple treatment can slow the progression of the disease and improve quality of life. Prevention and early detection are therefore crucial.

More than ever, we are calling on everybody to care for their kidneys. Prevention is still the best cure. Follow the eight Golden Rules to keep kidneys healthy.

1. Keep fit and active
2. Keep regular control of your blood sugar level
3. Monitor your blood pressure
4. Eat healthily and keep your weight in check
5. Maintain a healthy fluid intake
6. Do not smoke
7. Do not take over-the-counter pills on a regular basis
8. Get your kidney function checked if you have one or more of the 'high risk' factors such as high blood pressure, diabetes, family history of kidney disease, overweight, or being over 60 years of age.

WKD 2013 was a great success with more than 500 events in 157 countries, 80,000 website visits from 190 countries, 46 scientific journal editorials, a successful World Kidney Day Video on YouTube and a very active following on Facebook and Twitter. Many thanks for helping achieve this we challenge you to make WKD 2014 even better!

Start planning your activity

You can register your event online. If you have never held a WKD event, make this your first annual celebration. Whatever the activity, it will serve to bring kidney health to the center stage on this important day.

Find out more at: www.worldkidneyday.org

Do you want to be a WKD Champion?

Have you been heavily involved in WKD or wish to be even more active in the campaign? As a World Kidney Day Champion you can be the voice for WKD activities in your region and tell us how to better spread the WKD message.

Stay in touch with us with your suggestions through social media and continue with the good work you've done so far. In return, you will be officially recognized on the World Kidney Day website and will receive a WKD Champion digital badge.

Start off by answering our survey:
www.surveymonkey.com/s/worldkidneyday2014



Meet the new team!

A new team is supporting the campaign this year. We are here to help so don't hesitate to contact us at:

info@worldkidneyday.org or on **Facebook**.

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New to *ISN Education*, Global Outreach Postings help nephrologists from emerging countries publish manuscripts that are in line with ISN's mission and of interest to readers worldwide, including in developing countries. A team of reviewers from all over the world work together to help and support, and bring your manuscript to publication standards.

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Advancing Nephrology Around the World



ISN Committee News

ISN-ANIO India Committee develops a Clinical Renal Pathology Certificate Program.

ISN is partnering with ANIO (American Nephrologists of Indian Origin) and other nephrologists of the Indian diaspora to develop projects – helping create step changes in Indian nephrology through training, education, and capacity building.

Recognizing the pressing need for more expertise in renal pathology in India, the ISN-ANIO India Committee's first project was to develop a 'blended learning program' for renal pathology. Entirely funded through a generous personal donation from Mr. Devangbhai Patel, this one-year program blends learning through the web – both pre-recorded lectures and online discussion - with face-to-face teaching. Successful participants receive a "certificate of program completion".

The 12-month program started in October 2012 with 30 students, pathologists and nephrologists in India, who were selected from many applicants. Each student has access to 40 pre-recorded lectures (and completes a test after each lecture) and takes part in 12 monthly online discussions as well as attending two 3-day workshops held in India.

The course has been a great success and will be held again commencing in 2014. There are plans to make the course available in other parts of the developing world in the near future.

ISN –ANIO India Committee co-chair, Ajay Singh (Harvard, USA), with his steering committee, deserves great credit for his determined personal effort in moving this project so quickly from vision to execution.



ISN Resources

Read about the best highlights from ISN Education and discover what should not be missed in Kidney International.

Early fistula failure

This presentation features information on early arteriovenous fistula failure, its causes and diagnosis. Arif Asif, Professor and Chief Division of Nephrology and Hypertension, Albany Medical College, Albany, NY kindly provided this presentation.

To watch the full presentation, visit:
www.theisn.org/education



Transplanting the obese - separating myth from reality

Many transplant centers are reluctant to transplant obese recipients for fear of poor outcomes. This presentation covers three issues: the outcomes in obese transplant recipients, advising patients to lose weight prior to listing for safe transplantation and the comparative outcomes of transplantation versus remaining on dialysis amongst obese recipients.

Graft and patient survival after transplantation amongst obese patients is comparable to the non-obese. Weight loss on dialysis prior to transplantation is associated with adverse post-transplant outcomes and transplantation appears to confer a survival advantage over dialysis in obese recipients. Many thanks to Arif Khwaja, Consultant Renal Physician at the Sheffield Kidney Institute and Honorary Senior lecturer at the University of Sheffield, UK for this contribution.

Visit: **www.theisn.org/education**

Kidney International Highlights

Every month, Jai Radhakrishnan, Associate Editor of KI, selects for ISN Education various articles that have the highest education value.
Visit: **www.theisn.org/education**

Test your renal pathology knowledge with our multiple choice cases, visit:
www.theisn.org/education

Follow more about ISN Education on the ISN Education twitter account and get tweeting about nephrology!



YNC Corner

Young Nephrologists Committee takes first steps to make peritoneal dialysis a reality.

This July, Young Nephrologists Committee Past Chair Roberto Pecoits-Filho visited Queen Elizabeth Central Hospital in Malawi as an ISN Educational Ambassador. It was an eye opening experience but also a chance to share expertise and help set up a much-needed peritoneal dialysis program at the hospital. A critical area for expansion as hemodialysis services struggle to cope.

Queen Elizabeth Central Hospital has been involved in several ISN Global Outreach activities over the years including successful Sister Renal Center and Research and Prevention Programs.

According to Host Center coordinator Gavin Dreyer: "The most valuable aspect of the training was developing the skills to insert catheters, adapt the practicalities of developing PD in resource-limited settings."

He describes how the visit helped transform the way local doctors think about and deliver PD: "In Malawi, we have delivered a skill set for PD across multiple types of healthcare staff. This will result in lasting and measurable improvements in patient care for both adults and children. A better patient outcome also motivates local staff."

Roberto Pecoits-Filho adds: "The extended period of the training as well as its hands-on aspect provides a much more solid impact on the host center. Hopefully my visit, left not only motivation in the local community, but also useful protocols and models of care with practical information that was defined by analyzing local needs and reality."

The success of the Sister Renal Center partnership between Queen Elizabeth Central Hospital and Barts Health NHS Trust in the UK was the starting point for this Educational Ambassador visit. It reveals how getting involved in the program opens doors for partnerships and visits from experts from other countries and institutions.

So far the success of this partnership between the UK and Malawi has meant a redevelopment of dietary information for dialysis patients in Malawi. Continuous Medical Education courses in acute kidney failure have also taken place as well as a Research and Prevention project focusing on Chronic Kidney Disease in the country. This project is designed to measure the population prevalence of CKD in Malawi, assess the population burden of the major risk factors for CKD including hypertension and diabetes.

Gavin Dreyer helping out onsite.



ISN EAP Roberto Pecoits-Filho (2nd left) with colleagues.



facebook

The ISN YNC Facebook community is growing and we are 500 members strong. Get involved and join us today!

ISN Upcoming events

ISN Events connect global medical communities, giving them the knowledge and support to reduce the impact of kidney disease worldwide.

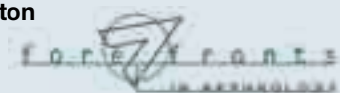
Forefront Symposium 2014

Charleston, South Carolina is the location for the upcoming ISN Forefronts meeting, taking place from March 6 to 9, 2014. This meeting will bring together researchers that study intrinsic regulation of renal function. "We hope to facilitate cross-fertilization of ideas and help promote a greater understanding of kidney function in health and in disease," say David Pollock, Donald Kohan and Jens Leipziger who all chair the ISN Forefronts organizing committee.

"Extrinsic" regulation of renal function by circulating hormones or nerves is critically important and has been extensively studied. "Intrinsic regulation" of renal function appears to be equally important. It is now apparent that a large number of local factors modulate renal function, including arachidonate metabolites, nucleotides, peptides, nitric oxide, reactive oxygen species, physical factors and others.

Understanding of such local regulation is rapidly evolving, including intratubular signaling, tubular-vascular interactions, cell-cell signaling and interactions between local and circulating factors. Nonetheless, this large research field is fragmented and could greatly benefit by a more integrated understanding.

www.isnforefronts.org/charleston



ISN Forefronts 2014

Intrinsic Regulation of Kidney Function

March 6-9, 2014, Charleston, USA
www.isnforefronts.org/charleston



ISN Nexus 2014

New Era of Drug Discovery and Clinical Trials in Kidney Disease

April 3-6, 2014, Bergamo, Italy
www.isnnexus.org/bergamo



ISN Forefronts 2014

Genetic Basis of Renal Disease

September 11-14, 2014, Boston (MA), USA
Website available soon.



ISN Nexus 2014

Hypertension and the Kidney

September 25-28, 2014, Brisbane, Australia
Website available soon.



For the full list
of ISN events
visit
www.theisn.org



13 March 2014

www.worldkidneyday.org

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Dr. Sharma, screening for kidney disease in Nepal



Advancing Nephrology around the World

