ISN NEWS 38 August 2011

A new Presidency ISN enters the next phase of its history



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Advancing Penrology around the World

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EDITORIAL

Starting a new era



The ISN Presidency is the focus of this edition of ISN News. At the recent congress in Vancouver, John Feehally was officially appointed as ISN President. He takes over from Bernardo Rodríguez-Iturbe who was dedicated, over the last two years, to reinforcing ISN's mission of advancing nephrology worldwide, contributing to the amazing achievements of ISN Global Outreach (GO) Programs.

In the following pages, John Feehally tells us more about what's in store for the next term. It is an exciting time for the ISN as it takes an important step forward in its history by becoming an independently-managed Society. Starting 2012, ISN will manage its activities from its own offices in Brussels, Belgium and the United States.

John is looking forward to this transition. Building more sustainability and diversity through education and mentorship are the main objectives for ISN in the future – with the activities of the ISN GO Programs leading this initiative. The ISN GO Sister Renal Center and Fellowship Programs in particular pride themselves in encouraging renal doctors from the developed and developing world to work together and exchange knowledge.

Bringing ISN members as well as affiliated and partner societies closer to those managing the ISN programs and events is also important for the further development of the Society. The ISN Gateway, our online home, has recently undergone a renovation, enhancing opportunities for ISN members to exchange knowledge and avail themselves of the latest clinical, biomedical and research developments relevant to clinical practice and research directions in the future.

I am sure you will find the insights embedded in the featured programs not only of tangible value, but also reinforce your decision to be part of the global advancement of nephrology, that is the ISN. We should all be proud of being part of an organization that is truly making a difference.

Professor Carol Pollock

ISN News

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Broadening horizons ISN partnerships

Spotlight on ISN partnerships

Much like networking helps professionals advance in their career, building partnerships is helping ISN grow as a Society - raising awareness and educating doctors on a global scale while responding to regional needs.

Today, ISN has established official society affiliations with 75 national and regional societies representing local nephrologists. The Society reaches more than 20,000 nephrology-related professionals.

Recent collaborations are educational offering opportunities to local fellows through the ISN Global Outreach Programs. These include: the American Society of Nephrology, the Asian Pacific Society of Nephrology, the Australian and New Zealand Society Of Nephrology, the Turkish Society of Nephrology, the Hong Kong Society of Nephrology, the Latin American Society of Nephrology, the Renal Association and the European Renal Association – European Dialysis and Transplant Association.

Partnering with ISN means Affiliated Societies can participate in ISN's mission of advancing nephrology worldwide. With collective membership, they sign up their entire membership base at a reduced rate. They will be the first to be considered for organizing joint events and gain priority when it comes to ISN endorsing special courses and/or events.

These collaborations also extend to related organizations such as the International Pediatric Nephrology Association, International Society of Hypertension, International Society of Peritoneal Dialysis and The Transplantation Society. Formalizing strategic partnerships is helping these societies work with ISN towards common goals by setting up specific projects to promote education in developing countries.





ISN and IPNA consensus statement to appear in KI

ISN and the International Pediatric Nephrology Association (IPNA) have written and endorsed a consensus statement describing how young people with kidney disease should be cared for when they are transferred from pediatric to adult nephrology units. The statement is set to be published in the September edition of Kidney International and IPNA's Pediatric Nephrology Journal. It will provide a basis for developing appropriate recommendations for local clinical practice.

The presence of a more diverse multi professional team to support children and their families is one of the major differences between pediatric and adult care. Wherever managed, young people from 14 to 24 years old also need special consideration and it is important that their viewpoints are considered when a transfer between units takes place.

For more information, visit: www.theisn.org

One to one with John Feehally

Newly-elected ISN President takes time out from his ISN duties to talk shop and highlight the challenges for renal doctors worldwide.



Our goals for the future

Diversity is one of ISN's main characteristics. We want to see ISN being a Society that understands the needs of all its members, so that it becomes more and more a global family. ISN members have so much to learn by sharing and exchanging knowledge with colleagues in other countries. Taking these different perspectives into account can help us as we care for our patients.

Sustainability is another characteristic which should become a hallmark of everything ISN does. This is not only understood as ISN's contribution to sustaining the environment as we saw expressed so clearly at this year's World Congress of Nephrology in Vancouver, Canada. It is also about developing sustainable education, training and capacity building programs so the exciting growth in nephrology we are now seeing in many developing countries can continue.

I had the privilege of chairing ISN's Fellowship Committee for 5 years. I never tire of meeting former ISN Fellows who are now nephrology leaders in their own countries and work to make sure that this new growth in nephrology is properly rooted, and will indeed be sustained in the long term.

Safe and healthy transplants

ISN continues to stand solidly with The Transplantation Society, advocating through the Declaration of Istanbul against transplant tourism. There remains much work to do. Constant vigilance is needed to maintain the gains we have made in our stand against bad transplant practices which have developed in parts of the world.

A further opportunity to raise awareness will come through World Kidney Day 2012 as the theme focuses on kidney transplantation.

www.worldkidneyday.org

Share and share alike

ISN's Global Outreach (GO) Programs remain at the heart of what we stand for. But, we must work to shed the old notion that this is 'one way traffic', in which those of us who work in the resource-rich developed world share what we have with those who have much less. GO Program participants testify this fact. Everyone learns as much as they ever teach: eye-opening lessons about medicine, culture and life in different circumstances which are part

Different worlds, different challenges

In developing countries, nephrologists go about their daily work without benefitting from many of the advantages of doctors in the developed world. Access to new medicines, dialysis treatment and transplant facilities are services that renal doctors, such as myself, can easily take for granted. Since long-term dialysis is unaffordable in these regions, early detection and prevention must be the basis of our approach to Chronic Kidney Disease (CKD).

We especially need to think more about the huge challenges faced by nephrologists in these regions where the consequences of infection, combined with the rapid growth of non-communicable disease are a 'double jeopardy', threatening to overwhelm available resources. At last the World Health Organization and the United Nations are giving non-communicable diseases 'top billing'. We must work to ensure that the importance of CKD as a major non-communicable disease is understood beyond those of us involved in nephrology.

I also want to see renewed efforts to raise awareness about Acute Kidney Injury (AKI) in the developing world. So many children and young adults have reversible AKI and the opportunities to save lives and restore health are within their grasp through affordable care.

Education tops the agenda

So many of ISN's programs have educational goals.

That is why we have an Education Task Force at work, to make recommendations about the best way to coordinate ISN's educational efforts - ensuring that what we offer meets the educational needs of our members.

We must grasp the opportunities of new technologies including social media to broaden access to ISN's educational output. The newer technologies cannot completely substitute traditional methods. There will always be enormous value in giving opportunities to younger nephrologists to 'meet the professor' face to face. By making the most of modern technology, now increasingly accessible worldwide, we hope to make educational opportunities more readily available for all. ISN wants to be at the forefront of these developments.

ISN visibility towards affiliated and partner societies

The international renal community is made up of societies that have common goals. ISN is building partnerships with international societies with interests close to ISN. Each one has its own focus: pediatric nephrology, peritoneal dialysis, hypertension and transplantation. Rivalry makes no sense. By building partnerships we can achieve more working together than we ever could alone.

Many nephrologists all over the world still seem to be unaware of much of what ISN is already achieving. We must continue to take opportunities through ISN's affiliated national societies to reach more nephrologists with our message. I am sure this will encourage many more to become ISN members and support our efforts.



IN THE DEVELOPED WORLD, PROVIDING **EDUCATIONAL SUPPORT AND GUIDANCE,** IT CREATES SELF-SUFFICIENT RENAL **CENTERS IN POORER COUNTRIES.**

> "The first ever kidney transplant in Ghana was made possible thanks to our partnership with the Birmingham Queen Elizabeth hospital

in the UK. Managing complex renal cases was made easier thanks to strong ties with colleagues in Birmingham and the quick response helped save lives. With commitment and determination from both sides, the seemingly impossible was made possible." Charlotte Osafo. Ghana and the **United Kingdom**

More information about ISN Global Outreach (GO) **Programs:**

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Renal pathology under the microscope

Huong Tran from Ho Chi Minh City University of Medicine and Pharmacy tells how the Educational Ambassadors Program (EAP) brought Vietnamese nephrologists and pathologists closer and streamlined pathology reporting.

The most rewarding aspect of this course was seeing nephrologists and pathologists share ideas and communicate. They don't often have the chance to sit down together as they work in separate departments.

The role of pathologists is crucial to nephrologists. ISN definitively pushed the boundaries and created interaction and encouraged us to share knowledge – one of the most important aspects of our job.

Moira Finlay, a Principal Specialist and Anatomical Pathologist from the Royal Melbourne Hospital in Australia brought a very practical point of view to how we work. By visiting the lab, she could directly show us the biopsy techniques she has learnt.

We have each picked up different techniques depending on the training we have had. We discovered easier and less time-consuming procedures that will change the way we currently work. In one lab, this made the final results more precise than Silver and Masson staining and gave pathologists more confidence when classifying the lesion.





Pathologists tend to use complicated jargon while nephrologists focus on understanding the big picture without taking details into account, contributing to a misinterpretation of pathology reports. Moira explained some recurring terms and the best language to use when writing a report. The case by case presentations served as an excellent challenge for participants, putting what they learned into practice and sparking debate.

This program truly differs from the ISN Global Outreach (GO) Continuing Medical Education Program, which we have been involved in for many years. It gives participants more time to learn, talk and challenge different cases with the specialist. They work with local doctors and build long-term professional relationships. Local pathologists now know that they have someone they can turn to for advice in the future.

Moreover, the EAP is a starting point for building links with other ISN GO Programs such as the Fellowship Program - opening doors for more exchanges in the future.

Find out about other EAP visits online at www.theisn.org

Looking back on the ISN World Congress of Nephrology (WCN) 2011

WCN 2011 was an appropriate symbol of ISN's achievements over the last 50 years, it marked the start of a new ISN presidency and underlined the Society's continuing educational role. Workshops, international speakers, poster exhibitions and a string of awards emphasized sustainability and diversity – the theme of this congress.

Here are some of the highlights...



Canadian Society of Nephrology President, Marcello Tonelli, opened the congress introducing the plenary speakers.



"WCN 2011 has a worldclass scientific program, helping advance the education of physicians and other professionals. It also supports the development of clinical research and facilitates the delivery of high-quality healthcare worldwide." Vivek Kute, participant from IKDRC-ITS,

Ahmedabad, India.

New ISN President Elect Giuseppe Remuzzi talks ISN GO Research and Program at the lunch symposium.



WCN 2011 in numbers

The congress gathered **5,100 participants** representing **115 countries**. The top 10 countries included the United States, Canada, Italy, United Kingdom, Germany, Japan, India, China, Australia and Brazil. **1,722 abstracts** were accepted out of a total of **2,013 applications**.

396 speakers took part in the 10 plenary sessions covering eight themes, 10 lunch symposia and 384 discussion sessions.

To reflect this year's theme of diversity, talks focused on all aspects of kidney disease and patient care. These included: fluid and electrolytes, tubular transport, heredity disorders, glomerular diseases and infectious diseases of the kidney, Acute Kidney Injury, Chronic Kidney Disease: Pathogenesis, Epidemiology, Prevention, Consequences of hypertension, diabetes, and vascular disease End Stage Renal Disease and transplantation.



A FALL IN THE PURPOSE AND THE

The ISN World Congress
of Nephrology 2013, an ISN event hosted
by the Hong Kong Society of Nephrology
in partnership with the Asian Pacific
Society of Nephrology,
will take place in Hong Kong
from May 31 to June 4, 2013.

www.wcn2013.org



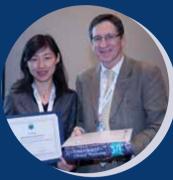
A roundup of this year's award winners...

Global Outreach awards

The GO Workshop brought program participants together, rewarding them for their hard work while giving newer members a platform to ask questions.



1st prize: Imed Helal (Tunisia), trained at the University of Colorado, Denyer, Colorado



2nd prize: Yang Li (Beijing, China) trained at Brigham and Women's Hospital, Boston, Massachusetts



3rd prize: Etienne Macedo (Sao Paulo, Brazil) trained at University of California

WCN awards



Roscoe Robinson Award - Meguid El-Nahas



Jean Hamburger Award - Eberhard Ritz



Bywaters Award - Ravindra Mehta



Alfred Newton Richards Award - Terry Strom



Lillian Jean Kaplan International Prize for Advancement in the Understanding of Polycystic Kidney Disease - Gerd Walz and James Calvet



ISN Amgen International Prize for Therapeutic Advancement in Nephrology - Giuseppe Remuzzi

Every little bit helps

Gradually sharing knowledge and expertise over the years, the ISN GO Sister Renal Center Program is helping local doctors and nurses in Ghana improve their skills and raise standards of treatment and patient care.

Last year, Michaela Mayhew, Liz Donovan and Dennis Kennedy from St-Georges Hospital (SGH) Trust's dialysis unit in London, UK visited their sister dialysis unit at Komfo Anokye Teaching Hospital (KATH) in Kumasi, Ghana. It was a second visit for Michaela, a nurse consultant in Venous Access Services at SGH, who had spent a week there in October 2008.

in October 2008.

The timing proved beneficial and helped staff onsite take on several actions to boost the unit's services, morale and communication. "Renal technician Dennis was valuable in teaching the enthusiastic biomedical staff affiliated with the dialysis unit. Liz's expertise as a nurse educator was particularly beneficial as the unit is keen to explore the feasibility of a peritoneal dialysis service," explains Mayhew.

Opened in 2000, the KATH dialysis center treats five to six patients per dialysis session and provides hemodialysis for local residents and patients from abroad. In 2009, 1,375 patients were referred to the nephrology unit and 477 patients underwent hemodialysis.

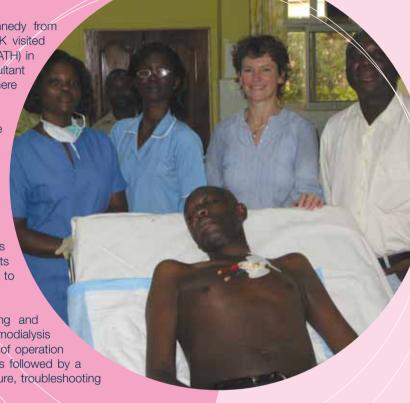
Staff voiced a strong need for validated training in nursing and technical services. A talk on blood and fluid pathways in hemodialysis machines, covering components, their purpose and principles of operation helped participants understand the basics of dialysis. This was followed by a detailed session on Fresenius modules to monitor blood pressure, troubleshooting techniques and operating a problematic machine.

"We were happy to provide the technicians with reference instrumentation that measures temperature, conductivity and pressure, so they maintain the dialysis machines and identify faulty equipment. We also helped clarify the procurement process for obtaining spare parts," adds Mayhew.

The UK team was impressed to see that many of the patients were dialyzed via a radio cephalic arterial-venous fistula (A-VF). Previously, no patient had an A-VF and were dialyzed using an 'acute' dialysis catheter designed to dwell for less than four weeks. Some of these catheters had been left in situ for longer than six months.

"We all felt extremely privileged to have visited Ghana and KATH. The renal teams are dedicated to providing the best care possible for their patients and are amazingly resourceful. In our opinion, the hospital must increase resources and improve supporting systems to ensure that the local population will continue to have access to a safe and consistent hemodialysis service," she concludes.

Read more ISN GO
success stories like these
online at www.theisn.org.
The next application deadline
for the SRC Program is
September 30, 2011.



CME update

Highlighting CKD in Sri Lanka

In May, ISN leaders participated in the first ISN Continuing Medical Education (CME) course in Sri Lanka. The Sri Lankan Association of Nephrology and Transplantation and the Postgraduate Institute of Medicine of the University of Colombo co-sponsored this event.

For several years, ISN has looked into Chronic Kidney Disease (CKD) in North Sri Lanka. ISN Council member Rezvi Sheriff helped get government resources together to set up the National Kidney, Urology and Transplant Institute. The course focused on how CKD is being investigated by local epidemiologists, the effects of snake bite poisoning and World Kidney Day 2012 activities .

Delegates met with local World Health Organization (WHO) representatives in Sri Lanka. The country's Health Minister wants to advocate for a stronger visibility of kidney disease on the WHO agenda at the upcoming Global Health Assembly. He also accepted a letter endorsing ISN's application for a working relationship with WHO.





Adult and pediatric nephrologists attend CKD course in Turkey

ISN, the International Pediatric Nephrology Association, European Society of Pediatric Nephrology and ERA-EDTA recently supported a Continuous Medical Education course on Chronic Kidney Disease: Epidemiology, prevention and management.

Adult and pediatric nephrology fellows as well as young nephrologists took part in this meeting designed to enhance their knowledge and skills to optimize and improve clinical practice and patient care.

Internationally-recognized experts from the US, Europe and Turkey organized lectures and several interactive sessions, helping participants solve different clinical problems under the supervision of experts in the field. The course received accreditation from the European Accreditation Council for Continuing Medical Education and the Turkish Medical Association.

If you are interested in organising a CME, please send your application no later than 6 months prior to the course date.

More information, visit: www.theisn.org

The YNC Corner

Young Nephrologist Committee (YNC) member Julie Lin shares her first experience of the Mentorship Program. A new initiative that the YNC is excited to promote.

The Mentorship Program sets out to help junior nephrologists gain more clinical and research expertise. "This program is quiet flexible. Most mentees were looking to interact with their mentor on a monthly basis and favored international exchange," says Julie Lin from the Boston Brigham and Women's hospital who recently started mentoring Nagesh Aghor from India.

"Mentees can get tips on how to start a research project or get advice on writing up their project. On a clinical level, I offered Nagesh a chance to spend time in Boston on an observership this fall," she adds.

Nagesh Aghor explains: "I am looking forward to my visit as I will be able to understand more about Critical Care Nephrology, CRRT and the Renal Transplantation Program at Brigham. The experience will definitively contribute to setting up a Renal Transplant Program at my hospital in Western India."

So far, 15 pairs are participating in this initiative. The YNC is enthusiastic about its benefits and would like to expand the program so all current YNC committee members and other ISN members can volunteer as mentors. Stay tuned online as of October for more information on signing up as a mentor or mentee.

This program also gives Mentors the chance to expand their contacts and increase visibility internationally. YNC members span different geographical regions that make up the ISN community. This initiative reveals once again how they understand the needs of the emerging medical community to develop education, research, professional development and leadership opportunities within ISN.

For more information, visit: www.theisn.org.

facebook

We want to hear from you on Facebook

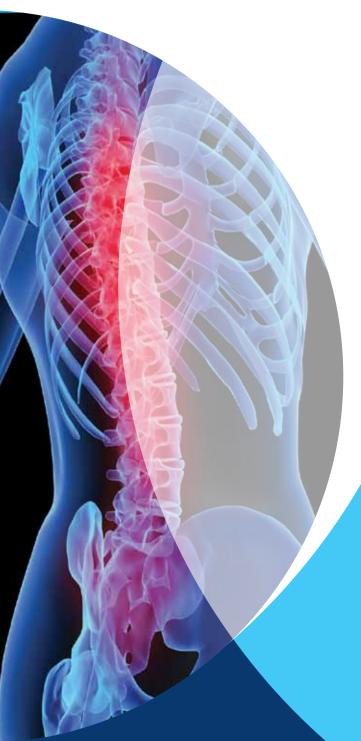
Let us know how you are involved with the Mentorship Program or other YNC activities by posting regular updates on ISN's Young Nephrologist Facebook page:

http://tinyurl.com/ync-isn



Roberto Pecoits-Filho is taking over from Fiona Brown as Chair of the Young Nephrologists Committee and will lead the committee for the next two years. ISN would like to thank Fiona for greatly contributing to the growth of the YNC. Roberto is very much looking forward to bringing his own experience to the role and taking on some exciting challenges.





ISN Nexus Symposium 2012

BONE AND THE KIDNEY

September 20-23, 2012 Copenhagen, Denmark

Topic highlights

- · Bone-kidney axis and vascular calcification
- Renal and intestinal divalent ion transport
- · New understanding of phosphate metabolism
- Regulation of PTH biosynthesis
- The fascinating osteocyte
- Vitamin D & calcimimetics
- Parathyroid function in CKD
- FGF23 and klotho
- Hormones, receptors and transporters
- Renal osteodystrophy
- Vascular effects in CKD-MBD
- Vascular calcifications in CKD-MBD

Co-Chairs

Tilman Drueke, France Jürgen Floege, Germany Heini Murer, Switzerland Klaus Olgaard, Denmark

For more information www.isnnexus.org/2012





ISN upcoming events

Get ready for ISN Forefronts this September



Are you heading to Aarhus Denmark for the ISN Forefronts symposium? Aarhus University will welcome participants from September 22 to 25, 2011.

This meeting covers Proteinuria: From glomerular filtration to tubular handling. Registration is still possible online. Depending on your choice of accommodation, you can also book your hotel on the ISN Forefronts dedicated website up to a month before this event.

Every year. ISN Forefronts symposia allow nephrologists to meet and develop a collegial relationship with leading researchers from other discipli<u>nes.</u>

The next meeting will take place in Ann Arbor, Michigan from June 7 to 10, 2012 and will focus on systems biology and the kidney .This will be followed by a meeting in Melbourne, Australia in September 2012 on tubulointerstitial disease in diabetic nephropathy.

For latest updates: www.isnforefronts.org/2011

Mark your calendar for Nexus 2012 ISN nexus



The next ISN Nexus symposium will take place in Copenhagen, Denmark from September 20 to 23, 2012. Following overwhelming success in 2006, the theme focuses again on the bone and the kidney, looking at the latest knowledge in physiology, pathophysiology and treatment.

Talks will center on bone disorder, mineral metabolism and cardiovascular disease in Chronic Kidney Disease (CKD) patients. They will also provide new insight into the Klotho gene, disturbed mineral metabolism and aging. Other topics include bone-kidney axis and vascular calcification, a new understanding of phosphate metabolism, the vascular effects and calcifications in CKD-MBD.

Watch out for more information on www.isnnexus.org/2012

Meet ISN staff and leaders at ASN Kidney Week 2011

Join us at ASN Kidney Week from November 8 to 13, 2011 in Philadelphia, Pennsylvania. Once again, ISN will hold an exhibition stand with World Kidney Day at this year's Kidney Week.

Please do stop by and find out more about our plans for 2012, meet ISN leaders, Kidney International editors and ISN staff. In addition, find out what World Kidney Day 2012 is all about.

More information: www.asn-online.org.









ISN Forefronts Symposium 2011

Proteinuria: From glomerular filtration to tubular handling

September 22-25, 2011 Aarhus, Denmark

Main topics

- Biology of the glomerulus
- The podocyte: experimental models
- Glomerular filtration barrier
- Signaling pathways in the glomerulus
- Glomerular proteinuria and fibrosis/controversy
- Dynamics of endocytosis
- Biology of the proximal tubule/proteinuria
- Future developments

Co-Chairs

Corinne Antignac, Paris, France Erik I. Christensen, Aarhus, Denmark Olivier Devuyst, Brussels, Belgium

For more information www.isnforefronts.org/2011/



Advancing Nephrology around the World