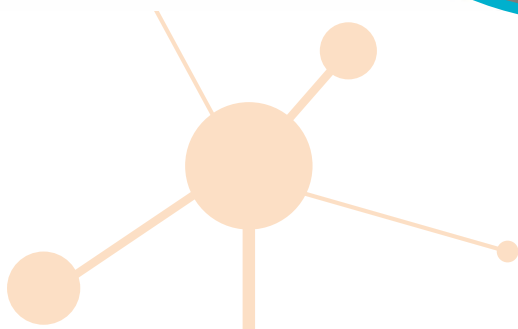


**INTERNATIONAL
SOCIETY OF
NEPHROLOGY**

ISN



Biennial Report 2013-2015



Advancing Nephrology Around the World



About ISN

Since its foundation in 1960, the International Society of Nephrology (ISN) has pursued the worldwide advancement of education, science and patient care in nephrology.

The Society represents a wide international network and provides an efficient platform for timely scientific exchange, debate and dissemination between healthcare professionals around the world. It is also dedicated to addressing the disparity between the developing and developed worlds in the research, diagnosis, treatment, and prevention of kidney disease.

The ISN has 9,000 professional members from 130 countries. In addition, it closely collaborates with over 70 national and regional nephrology societies worldwide, representing about 20,000 professionals.

The ISN continues to develop and consolidate several programs, initiatives and partnerships that will help to accomplish its two overarching goals: reducing the incidence and impact of kidney disease worldwide, and making the society a leading international organization for all issues related to the science and practice of nephrology.

ISN also strives to advance nephrology worldwide through the help of its membership, publications, meetings, ISN global outreach programs, as well as concerted efforts such as World Kidney Day.

This ISN Biennial Report reflects on the Society's successes in the past two years and highlights how it is helping advance kidney care on a world scale.

Vision

The International Society of Nephrology aspires towards the elimination of kidney disease worldwide.

Mission

The International Society of Nephrology (ISN) is dedicated to advancing the diagnosis, treatment, and prevention of kidney diseases in the developing and developed world.

It will achieve this philanthropic mission through collaborations, meetings, publications, outreach, and other activities that:

- Raise public awareness of the importance of early recognition and treatment of kidney diseases.
- Connect professionals interested in kidney and related diseases around the world.
- Support research to achieve optimal care of people with kidney diseases.
- Provide nephrology education and training worldwide, and ultimately:
- Reduce the frequency and impact of kidney diseases and their associated conditions.

Values

The International Society of Nephrology:

- Values new knowledge and is committed to excellence in research, education, and patient care in the developed and developing world.
- Will always act in a way that is politically neutral, humanitarian, and culturally diverse.
- Values collegiality and interaction and is committed to diversity in membership, governance, committee structure, and programmatic activities.
- Is committed to the scientific basis of nephrology and to advancing knowledge across all geographic, national, racial, religious and economic conditions.
- Values the needs of nephrologists and their patients and is committed to achieving optimal standards of care worldwide.

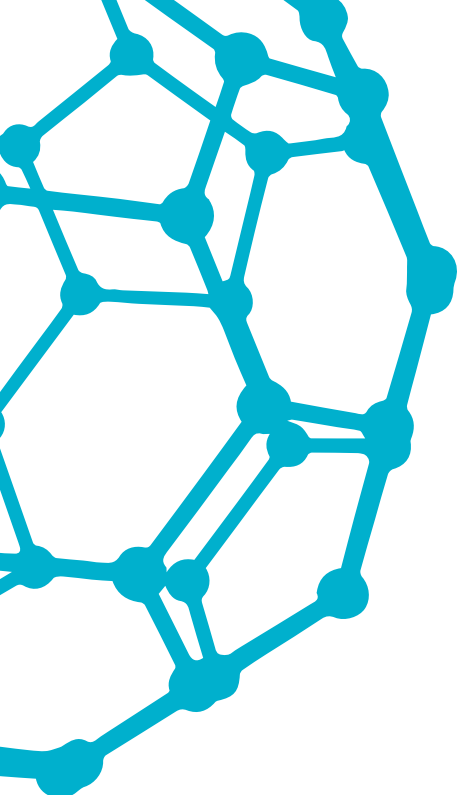


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Message from the President

ISN is a large global society which has, since its foundation, pursued the worldwide advancement of education, science and patient care in nephrology.

Continuing the Success

Looking back at the past two years, through its many programs that were already in place, ISN has contributed to further promoting strategies for the prevention, diagnosis and treatment of kidney disease at the global level with significant achievements. Remarkable results have been obtained in raising public awareness of the importance of early recognition and treatment of kidney diseases throughout several initiatives like World Kidney Day, by connecting professional interest in kidney and related diseases around the world, and providing nephrology education and training worldwide through the Fellowship programs and CME courses. In part, these achievements are driven by a genuine interest of nephrologists around the world in reaching equity of access to knowledge and care and have also been made possible by significant scientific advances which many laboratories and clinical centers around the world have produced in the kidney disease field. These scientific results and the dissemination of knowledge through Kidney International, Nature Reviews Nephrology, Nexus and Forefronts Symposia, as well the excellent ISN Gateway website, have also helped to nurture numerous colleagues through fellowships and training, to the benefit of nephrology, especially in low-and middle-income (LMIC) countries. The success of these programs has further encouraged the establishment of novel links between renal centers in various parts of the world

through the Sister Renal Center Program. Through the Clinical Research Program, ISN has also continued to promote and partially support clinical research studies in LMIC, addressing specific local needs, helping ISN members in the developing world to gather epidemiologic data about kidney disease, and possibly to influence local health policy.

ISN educational activity has recently been implemented through the establishment of the Educational Ambassadors Program, through which experts travel to centers in developing countries to provide training to local doctors. As a result of these extraordinary initiatives the ISN has reached most parts of the world previously deprived of contact with renal science and renal patient care. In this context, ISN has started to encourage and support “South-to-South” education/training programs. Actually, ISN has realized that the North-South capacity gap in health sciences, including nephrology, continues to narrow, but it has by no means disappeared. At the same time, a new gap in capacity has emerged between scientifically proficient developing nations, the so-called South-South gap. This divide has surfaced because the number of developing countries making significant strides in building scientific capacity remains small. Meanwhile, the number of countries that have not made significant strides is large and includes most countries in sub-Saharan Africa, several in Central and South America, and several countries in Central and South East Asia. However, there are examples of increasing South-South cooperation that are helping to close this gap. ISN has been promoting action that enables an increase in the number of post-graduate and post-doctoral fellows moving from one part of the Southern hemisphere to another where excellence centers are in place to obtain further training. Often a common language, a similar life style, and a similar educational curriculum may be add-on factors for better training.

Programs and Initiatives Launched in 2013-2015

But the past two years have also seen the beginning of exciting novel initiatives for ISN.

The definition of a new governance structure with the ISN Program Board, Topic Advisory Committees and novel Regional Boards worldwide has highlighted the need to ask even more of ourselves, i.e. to enhance the humanitarian view of our Society. Although in some parts of the world acute and chronic kidney diseases are preventable or treatable disorders, in many other regions there is no care for these diseases.





The nephrology community needs to commit itself to reducing this divide between high-income and low-income regions. Healthy populations are indeed the basic engine for reaching sustainable development. Therefore ISN has realized that there is a need for more concerted action in developing countries, particularly in low-income nations, where a shortage of nephrologists and a lack of awareness of early recognition and treatment of kidney disease is still a major problem. However, ISN has also recognized the need for a new approach to its humanitarian mission for renal global health, namely to ask what countries want, not what development partners think they need. To this purpose, first there has been a commitment to listening to local voices, which are the only ones entitled to highlight what a given country needs in order to advance nephrology. There have also been efforts to create in-country capacity, notably human capacity, that can determine problems to be addressed by itself instead of having a westernized impression of those problems imposed from the outside. Listening to different experiences with illness and specific needs in all centers, and learning from other countries, means that strong responsive systems can be built. Health for kidneys can then be claimed as the universal right that future generations can fully deliver.



Oby25 Initiative

With this in mind, ISN has launched the “AKI Oby25” initiative, a global health project that is unique for and characterizes ISN. Acute kidney injury, AKI, is a common disorder throughout the world, which is associated with severe morbidity, mortality and cost. However, the challenges posed by AKI in high-income countries are different from those in low-income countries,

which are present within a framework of limited resources for diagnosis, late or no referral to nephrology services, and lack of access to renal replacement therapy. It was thought a moral imperative to address the issue of people, mostly children and young adults who, in today’s world, are still dying from potentially treatable acute kidney injury. In this context ISN has created a long-term program, the “Oby25” Initiative, which argues that zero people should die of untreated AKI in the poorest parts of Africa, Asia and Latin America by 2025. The mission is to eventually reduce the high burden in terms of that consequence to this disorder in resource-poor regions worldwide. For this initiative, under the project leadership of Ravindra Mehta and with major contributions from numerous eminent nephrologists from all over the world, as well as the endorsement of regional and national nephrology organizations, ISN has developed a multifaceted, integrated program with globally applicable strategies. It is a challenging but potentially feasible and productive initiative that would require a broader vision about how the public and private sectors can work together in partnership with the governments of low-and middle-income countries and leading non-governmental organizations operating locally, to assure sustainability of the Oby25 program. But success will also be facilitated if the ISN “Oby25” Initiative is considered an initiative that recapitulates and realigns all other ISN activities/programs, like the Fellowship, Sister Renal Center, Clinical Research, Educational Ambassador as well as CME programs.

World Congress

In terms of its humanitarian views for global renal health, ISN has also decided to move toward a novel approach for its leading biennial educational event in international nephrology, the ISN World Congress of Nephrology (WCN). The focus of WCN will be on renal health problems specific to the WCN host region, with local people at the highest scientific level. Thus the WCN 2015 in Cape Town, in addition to being the first WCN in Africa, is proposing the excellently constructed scientific program of Pierre Ronco and his Scientific Program Committee, informed by the key issues of HIV nephropathy and of the new emerging viral infections, like Ebola and Hantavirus infections, causing acute renal failure. These are thrilling challenges for healthcare in Africa, but also global threats. Thanks to Julie Ingelfinger and the International Pediatric Nephrology Association (IPNA) the

WCN will also bring special attention to pediatric nephrology in order to address issues related to maternal and child renal healthcare, much needed in resource-poor countries. WCN 2015 will for the first time also pay particular attention to renal nurse education through their involvement as attendees and speakers. It is anticipated that this will have great relevance and potentially have an enormous impact on renal care in resource-poor settings in Africa where nephrologists and even non-specialized physicians are very scarcely available, if at all, and here well-trained nurses could make the difference between life and death for people with kidney disease.

Advisory Committee for Clinical Trials and Studies (ACCTS)

Finally, ISN has appointed the Advisory Committee for Clinical Trials and Studies (ISN-ACCTS) to facilitate the development and execution of clinical trials in a highly ethical worldwide framework, a particular unmet need in developing countries. This program ensures access to timely and unbiased expert education and advice for both independent and industry investigators. The ISN-ACCTS is working towards eventually protecting the rights of clinical trial participants, both investigators and patients, particularly in developing countries.

Advocacy

January 2012 marked ISN's acceptance into official relations with the World Health Organization (WHO), the only nephrology organization among the 182 nongovernmental organizations to have this status. Continuing this relationship over the past two years has further contributed to exposing the WHO to ISN advice and opinion about kidney health and kidney disease, giving ISN opportunities to attempt to influence global health policy, underlining the key role of renal disease within the global burden of non-communicable disease and related mortality.



My Personal Thanks

As ISN moves into a new phase under the Presidency of Adeera Levin, I would like to thank the many ISN members who during the two-year presidency period most generously put in their personal time and efforts to ensure that ISN continues to uphold high standards of education, research and advocacy worldwide, especially in low-and middle-income regions. I must also acknowledge that ISN's significant achievements have also been obtained thanks to the enormous and continuous work of Executive Director Luca Segantini and his team.

My personal wish is that ISN will continue to help to achieve novel insights into the challenges and possible solutions for renal health care and to build new collaborations which may leave a significant mark on the management of patients with kidney disease, eventually contributing to further nephrology advances all over the world.

A handwritten signature in black ink, appearing to read 'Giuseppe Remuzzi'.

Giuseppe Remuzzi
ISN President (2013-2015)

Message from the Executive Director



The last two years have been full of activity for ISN leaders, staff and members. We have launched some significant new programs and consolidated our position as a global nephrology society with strong links in practically every country in the world. In a continued period of global financial instability, ISN has managed to expand its activities, grow its reserves and reinforce its operations, an achievement that should make all those who have contributed very proud.

The first and most visible novelty has been the launch of a new advocacy program, named 0by25 - Zero Preventable Deaths from Acute Kidney Injury by 2025. This initiative has truly mobilized ISN leaders across the globe in an unprecedented way. The results of its first phase, data collection and analysis of more than 4,000 AKI patients worldwide, will be presented at WCN 2015 in Cape Town. The Lancet is publishing these results, and will continue to be involved in 0by25 in the future. The implementation phase will bring relief to the thousands of patients affected by this condition and hopefully contribute to achieving the very ambitious objective of the initiative.

Another considerable achievement in these two past years has been the WCN 2013 in Hong Kong, which has been the most successful in ISN history in terms of revenue and attendance (if we exclude WCNs organized in partnership with other Societies). Feedback from participants has been fantastic, and we are now busy trying to replicate this great achievement in Cape Town, South Africa, where the first WCN ever to be held in Africa will take place in March 2015. This is an exciting challenge, one that is galvanizing the whole nephrology community throughout Africa.

The launch of ISN's direct fundraising platform, World Kidney Fund, in 2014 will further reinforce the Society's ability to fund its Programs.

Among achievements in the past two years, I also want to mention ISN Education, an ever-expanding collection of carefully vetted, high-quality content sourced by the best nephrologists worldwide, which is presented in a variety of interactive formats. The success of the first years of ISN Education has clearly demonstrated the need for more educational opportunities, and ISN leadership is committed to expanding its offering by turning ISN Education into a curriculum organized along the lines of proper CME needs, and taking the challenge of providing

accreditation across geographic and regulatory barriers. This is a considerable advancement, which will stretch ISN organizational capabilities, but we are confident that the global nature of our Society will allow us to overcome the current barriers to provide a universally recognized educational curriculum in nephrology.

To complement and boost ISN Education, we can of course count on our excellent range of publications, of which *Kidney International* is the crown's jewel. Since the end of the contract with our current publisher, Nature Publishing Group, is approaching in 2015, I am delighted that ISN managed to find a great new publisher in Elsevier and signed a very solid deal for the next 10 years. Considering the big changes happening in the field of medical publishing, it is very reassuring that *Kidney International* is still such an attractive journal. Even more important for our not-for-profit society is the fact that royalties from *Kidney International* contribute a large part of our philanthropic activities' budget.

Finally, I want to mention that I am very proud of the seamlessness with which our team at ISN Headquarters in Belgium and the USA has been able to support the classic and new initiatives ISN launched in the past two years, adapting their skills to new needs and working hard to make sure no program was overlooked and objectives were reached. We are a reasonably lean team, so I can only congratulate my exceptional colleagues for being efficient and for never saying no to a challenge. Of course we could not achieve this without exceptional ISN leaders and members working together with us, showing the incredible power of a tight community that is united in the common aim to advance kidney care worldwide.



Luca Segantini
ISN Executive Director

ISN Programs

Non-communicable chronic diseases, including cardiovascular disease, hypertension, diabetes mellitus and chronic kidney disease (CKD), are a leading threat to public health and healthcare budgets worldwide.

The ISN Programs are dedicated to meeting the educational and training needs of those caring for kidney disease patients in the developing world. There are five programs including:

- Continuing Medical Education (CME) courses and site visits
- Sister Renal and Transplant Center partnerships
- Fellowships
- Clinical research projects
- Educational Ambassador visits

Setting up programs within developing regions

ISN Programs participants from emerging countries are training medical communities in their surrounding regions, becoming national leaders in their field. By integrating two or more ISN Programs into a long-term plan, nephrology services are growing in specific countries within certain developing regions.

ISN joined forces with the International Pediatric Nephrology Association (IPNA), the International Society of Peritoneal Dialysis (ISPD) and Sustainable Kidney Care Foundation (SKCF) to develop the Saving Young Lives (SYL) project in Africa and South East Asia.

SYL aims to set up programs to manage acute kidney injury (AKI) and acute peritoneal dialysis (PD) in low-resource settings. ISN, IPNA, and ISPD provide education, training, and capacity building but are not involved in helping to meet the direct costs of patient care. SKCF uses its expertise and resources to provide centers with PD catheters and fluids in a sustainable way.



Program	Budget 2010	Budget 2011	Budget 2012	Budget 2013	Budget 2014	Received applications (total for 2011-2012)	Successful applications (total for 2011-2012)	Active in December 2012	Received applications (total for 2013-2014)	Successful applications (2013-2014)	Active now
Fellowship	660,000	668,000	674,000	674,000	1,036,500	121	92	29	133	95	41
Sister Renal Centers & Transplant Centers	210,000	264,000	283,500	283,500	328,475	20 new and 40 upgrades	16 new and 16 upgrades	34	58 new and 44 upgrades	27 new and 19 upgrades 8 graduated pairs since 2013	50
CMEs	255,000	263,000	318,000	318,000	288,000	104	100	n/a	95	92	n/a
Clinical Research	100,000	108,000	153,000	153,000	148,000	38	15	7	54	17	13
Educational Ambassadors	30,000	48,000	75,000	75,000	87,000	40	38	14	36	36	n/a
TOTAL USD	1,255,000	1,351,000	1,503,500	1,503,500	1,887,975						

SYL is establishing 12 hospital centers offering acute PD with seven of these sites are already treating children. The projects also focus on training and educating the community about AKI awareness, prevention, and early care as well as identifying cases needing hospital care.

With five years worth of funding from a charitable foundation the ultimate goal of SYL is that centers can establish a model for developing similar programs in many other low-and-middle income countries worldwide.



Organizational structure

In 2014, ISN changed its organizational structure to improve communication between regional representatives and develop more training opportunities worldwide.

The previous Regional Committees and Topical Committees merged into Regional Boards. The Topical Advisory Committee Chairs (Acute Kidney Injury, Chronic Kidney Disease, Clinical Trials, Dialysis and Kidney Health in Disadvantaged Populations, Pathology) now also work more closely on a global and regional level through the ISN Programs Board, coordinated by one Program Chair.

This strategic re-alignment of advisors, content experts and regional experts from the Programs Board and Regional Boards ensure ISN is more effective in building nephrology capacity throughout the world, and link the developing and developed world in a sustainable way.

Main stakeholders within the ISN Programs structure

ISN Programs	Topical Advisory Committees	Regional Boards
CME	Acute Kidney Injury	Africa
Fellowship	Renal Pathology	Eastern & Central Europe
Sister Renal Centers (SRC)	Interventional Nephrology	Latin America & Caribbean
Clinical Research	Dialysis	Middle East
Educational Ambassadors (EAP)	Chronic Kidney Disease (CKD)	North & East Asia
	Young Nephrologists	Oceania & South East Asia (OSEA)
	CKHDP	Russia CIS
		South Asia
		Western Europe
		Northern America

ISN Programs partnerships

From 2013 to 2014, ISN continued to focus on developing existing and new partnerships with other societies and sponsors.

These included AMGEN, AbbVie, ANIO, the Australia and New Zealand Society of Nephrology (ANZSN), the Asian Pacific Society of Nephrology (APSN), the Cross Regional Education and Exchange in Dialysis (CREED), the European Renal Association - European Dialysis and Transplant Association (ERA-EDTA), the Hong Kong and Chinese Societies of Nephrology (HKSAN), the International Pediatric Nephrology Association (IPNA), Kidneys for Life (Fundraising for the MRI Renal Units), Kidney Research UK, Otsuka, the Renal Association (RA), Roche, the Sociedad Latinoamericana de Nefrología e Hipertensión (SLANH), the Salmasi Family, The Schrier Family, The Transplantation Society (TTS), the Turkish Society of Nephrology (TSN), and the University of Michigan.

In the first half of 2014, ISN initiated new partnerships with Kidneys for Life fundraising for MINT.



The ISN Fellowship Program

The ISN Fellowship Program, chaired by David Harris (Australia), has helped train individuals who have become leaders in nephrology and medicine, often initiating the first clinical and training programs in their own countries.

The program offers two types of Fellowships:

- Long-term (7–12 months)
- Short-term (2–6 months)

The guiding principle of the program is that Fellows must return to their home countries after their training to share the knowledge and experience that they acquired during their Fellowship to advance kidney care in their communities.

A total of 100 Fellows received training in this two-year period. Program sponsorship substantially increased the total value of the program, allowing many more fellowships to be awarded than before.

In this period, more emphasis was placed on intra-regional fellowship training, allowing Fellows to train in an approved center within their regions. This ensures more clinical contact with patients and offers a setting more compatible with the Fellows cultural and linguistic needs. In 2014, 36% of fellowship awards were intra-regional.

The Program has become increasingly competitive with more and more applications received each year. The Program benefits from the active participation of the ISN Regional Boards and will favor fellowships with the greatest value for the patients in the Fellow's home region.

Fellowship success story

Sandy Zeidan from the Saint George Hospital University Medical Center in Beirut, Lebanon spent twelve months at the Clinique Universitaire Saint Luc in Brussels, Belgium. The training focused on dialysis. She explained: “the fellowship gave me the opportunity to learn more about hemodiafiltration, home dialysis and advances in peritoneal dialysis. I will now do my best to apply all that I learnt in my home country, Lebanon and hope to bring progress in dialysis there.”

She is now nephrologist in charge in a dialysis center in Lebanon, treating between 90 and 100 patients. She hopes the training makes for an easier diagnosis and management of glomerular diseases, improves dialysis techniques (hemodiafiltration, home dialysis) and increases local involvement in research and teaching.

The ISN Sister Renal Centers Program

The ISN Sister Renal Centers (SRC) Program, chaired by Paul Harden (UK), helps improve how nephrology is practiced in emerging countries by linking emerging renal centers or units with established centers of excellence in the developed world.

Over six years, they build long-lasting and stable partnerships between a center in the developing world and another in a developed country, training local staff in state-of-the-art clinical practice.

These links become active hubs for implementing disease-preventive strategies within specific regions. The Trio Program also encourages sister centers, once they have graduated, to grow and potentially support other centers in their region.

Sister Renal Centers Program success story

Queen Elizabeth Central Hospital joined forces with the Royal London Hospital, UK to improve care for kidney patients in Blantyre, Malawi. Thanks to this partnership Roberto Pecoits-Filho (Brazil) shared expertise and helped set up a much-needed peritoneal dialysis program at the hospital.

Hemodialysis services were struggling to cope. 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 peritoneal dialysis in resource-limited settings.”

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



The ISN-TTS Sister Transplant Centers Program

Co-Chaired by Paul Harden (UK), and Dirk Kuypers (Belgium), the ISN-TTS Sister Transplant Centers Program is a joint partnership set up between ISN and The Transplantation Society (TTS) to create new kidney transplant centers and develop existing kidney transplant programs in emerging countries.

Following the success of the ISN Sister Renal Centers Program, this initiative encourages transplant centers to work together to increase opportunities for kidney transplant patients in developing countries.

An experienced transplant center in the developed world lends its support to an emerging transplant center to facilitate vital multidisciplinary training and encourage both centers to exchange their knowledge and expertise.

Sister Renal Transplant Centers success story

Until recently, there were no transplant services available in Gaza. About 500 adult patients and 20 children were on chronic hemodialysis. Only those who could afford to travel away could benefit from this treatment.

All this changed thanks to the ISN-TTS Renal Center Transplant Program that led to the first kidney transplants in the region in January 2013. A team of surgeons from the Royal Liverpool University Hospital, UK helped local doctors at the Al Shifa Hospital in Gaza, Palestine carry out eight kidney transplants including three on children.

Abdul Hammad from the UK supporting center explains that: “a renal IT system was also started. Once this is installed in every nephrology center in Gaza, we can start a renal registry and a national transplant waiting list for kidney transplantation.”

He adds: “These patients may receive what is in many westernized countries a life-enhancing operation, but in Gaza it is undoubtedly a life-saving operation.”

ISN Clinical Research Program

The ISN Clinical Research Program, chaired by Marcello Tonelli (Canada) who took over from the program founder Giuseppe Remuzzi (Italy) in 2012, has influenced the lives of many patients.

It has helped high-risk individuals in rural communities get screened and treated for chronic kidney disease through the Program for Detection and Management of Chronic Kidney Disease, Hypertension, Diabetes and Cardiovascular Disease in developing countries (KHDC)

Another major purpose of the program is to develop a sustainable research infrastructure in institutions that have not previously carried out research. In September 2013, a scientific writing course at the Mario Negri Institute in Bergamo (Italy) sought to increase kidney research in developing countries.

The course took participants through the various stages of manuscript and grant proposal writing as well as the review process. It also encouraged them to present their work.

ISN-TTS Sister Transplant Centers

2013	2014	Region	EC Country	SC Country	Emerging Center (EC)	Supporting Center (SC)
C	C	Latin America	Guatemala	US	FUNDANIER/ Hospital Roosevelt	University of California, Los Angeles
C	C	E & C Europe	Macedonia	Belgium	University of Medicine Skopje	Antwerp Univeristy Hospital (UZA)
C	C	Middle East	Palestine	UK	Al Shifa Hospital	Royal Liverpool University
C		Latin America	Nicaragua	Argentina	Hospital Manuel De Jesus Rivera	Instituto De Nefrologia - Nephrology s.a.
C		OSEA	Cambodia	France	Hopital Calmette Pnom-Penh	CHU Saint Etienne
C		OSEA	Indonesia	Germany	Gading Pluit Hospital	University Hospital UKE
C		Africa	Cameroon	Tunisia	Hopital General Yaounde	Charles Nicolle Hospital

In 2014, to align with the Oby25 Global Snapshot Study, several projects were awarded funding based on their ability to contribute new data on acute kidney injury (AKI). The table below shows the breadth and geographic spread of projects supported by the program in 2013-2014.

ISN Clinical Research Program success story

The ISN Clinical Research Program set up a screening and follow-up project in the Southern Provinces of China to gather data and tackle kidney disease by understanding the early signs.

“The project made a great social and economic contribution to public health and helped found the Provincial Key Laboratory of Metabolic Diseases at the Southern Medical University Affiliated 181 Hospital,” explains ISN Clinical Research Committee Chair Marcello Tonelli.

The pilot study began in 2004 in Zhuhai and was coordinated by Hequn Zou, Director of the Institute of Urology and Nephrology, Third Affiliated Hospital, Southern Medical University.

Some 15,000 people, between 18 and 75 years old, participated in the study from across the cities of Zhuhai, Dongguan, Guangzhou, Guilin, Xiamen, Zhangzhou and Wuhu.

Many PhD students, Master degree students and over one hundred medical staff received training through the project. In 2013, a new grant helped to conclude the last Kidney, Hypertension, Diabetes and Cardiovascular disease project, with a further epidemic and proteomic study on new community residents.

The ISN Educational Ambassadors Program

Saraladevi Naicker (South Africa) chairs the Educational Ambassadors Program (EAP). It gathers expert volunteer trainers (ambassadors) to give hands-on training or help develop new clinical services, community-based research or screening programs across the developing world.

The EAP provides an invaluable opportunity for personal involvement by ISN members. Today more than 150 ISN members have volunteered to become ISN Educational Ambassadors.



ISN Clinical Research Projects 2013-2014	
Pretoria, South Africa	Beta-2-microglobulinuria: A cross sectional study of human immunodeficiency virus infected children
Damanhour, Egypt	Egypt information, Prevention and Treatment for Chronic Kidney Diseases (EGIPT-CKD) Project, step 3: Multicenter community based mass screening program for chronic non-communicable diseases through evidence based web program
Chandigarh, India	Prediction equation for estimation of glomerular filtration rate in Indian population
Bangalore, India	Chronic kidney disease: Assessment of progression, co-morbidities and quality of life in Indian children
Shenzhen, China	Protocol of novel KHDC Program under the background of new Chinese community medical model
San Salvador, El Salvador	Chronic Kidney Disease of unknown origin (CKDu) – is it the same disease in Central America and in Asia? A comparison of renal histopathology – and biochemical findings ins patients with CKDU
Pokhara, Nepal	Yes, we can do primary prevention – but is it really effective in reducing risks?*
Saint Louis, Senegal	Efficacy of kinkeliba in non complicated hypertensive patients
Johannesburg, South Africa	A cross-over randomized controlled trial to determine whether end stage renal disease patients receiving chronic renal replacement therapy are more likely to have an improved lipid profile after including plant sterols as part of their dietary intake for four weeks
Kumasi, Ghana	12 year follow up of cohort of 1,013 40-75 year olds in 12 village communities in the Ejisu-Juabeng and Kumasi Districts: observations on changes in glomerular filtration rate (GFR) and blood pressure
Butare / Huye, Rwanda	Incidence, Risk Factors and Outcomes of Acute Kidney Injury in the tertiary care, teaching hospitals of Rwanda
Pondicherry, India	Comparison of clinical characteristics etiology and the clinical outcomes between the patients with community acquired and hospital acquired Acute Kidney Injury in a tertiary health care hospital in south India
Beijing, China	The Incidence and Mortality of Acute Kidney Injury in China: A Nationwide Multi-center Retrospective Survey
Congela – Durban, South Africa	The effect of HIV infection on the management of renal failure among patients undergoing peritoneal dialysis
Ibadan, Nigeria	Screening for acute kidney injury among hospitalized children in Nigeria
Guadalajara / Jalisco, Mexico	The Impact of Creatinine Standardization on the Identification of Patients with Kidney Disease in Mexico
Curitiba, Brazil	Salivary Urea Nitrogen as a diagnostic tool in Acute Kidney Injury

Educational Ambassadors Program success story

Shlomo Cohney from Melbourne, Australia recently visited Khon Kaen hospital in Thailand. He brought with him expertise in transplantation, transplant immunology as well as an established interest in clinical and laboratory research.

The Khon Kaen hospital kidney transplantation program started in 1990 and is amongst the top renal transplantation programs in Thailand, having performed over 400 transplants. However, expertise in transplant immunology and development of research is important for the program to progress. “We needed an expert to strengthen our knowledge in immunology and guide us on how to initiate a basic science study and improve the quality of the laboratory facilities”, says Sirirat Reungjui from the Faculty of Medicine at Khon Kaen University.

Cohney found it rewarding “to see the looks of acknowledgement as a passion for biology was shared”. Learning the mechanics of local healthcare and the specific local socio-cultural barriers made the experience valuable for all.

ISN Continuing Medical Education (CME) Program

Through the ISN Continuing Medical Education (CME) Program, led by Frederik Finkelstein (USA), the Society brings essential teaching and training to some 12,000 doctors and healthcare practitioners worldwide each year.

The CME Program offers medical professionals formal nephrology education. Usually three ISN-sponsored speakers, often ISN leaders, give a minimum of two lectures each during a one-day educational event. Some CMEs are stand-alone while many are incorporated into larger local and regional meetings to increase the number of physicians who can attend.

Programs typically focus on:

- Clinical nephrology
- Critical care nephrology
- Prevention of chronic kidney disease
- Translational nephrology
- Hemodialysis
- Peritoneal dialysis
- Transplantation
- Renal pathology
- Tropical nephrology

Between 2013-2015, 110 CME project applications were accepted. The table below shows projects activity in the different regions, comparing the period of 2011-2014.

Regions	2011	2012	2013	2014
Africa	8	6	6	5
Central & Eastern Europe	5	5	5	3
North and East Asia	6	7	4	4
OSEA	3	5	5	5
Russia & CIS	5	7	6	5
South Asia	9	11	7	10
Middle East	5	2	5	2
Latin America	10	6	7	10
Total	51	49	45	44



Continuing Medical Education Program success story

The Sociedad Latinoamericana de Nefrología e Hipertensión and Sociedad de Transplante de América Latina y El Caribe came together for an online course about immunopathology and immunointervention, gathering some 600 participants from Latin America, Europe and the United States.

ISN President Giuseppe Remuzzi gave a closing lecture and actively joined discussions. The course took place over two months and every week focused on a new issue within transplantation and glomerular disease. "It definitively widened the scope of participants, reaching nephrologists from far-away areas who do not have the chance or the finances to take part," explains Francisco González-Martínez, Vice President of the Sociedad de Transplante de América Latina y el Caribe.

This course was coordinated from Montevideo, Uruguay by members of the Centro de Nefrología del Hospital de Clínicas and Universidad de la República with the participation from all the reference centers in the region. The Uruguayan Center has a successful seven-year Sister Center partnership with the Hospital Universidad Bellvitge Barcelona.

The partnership helped Montevideo make progress in transplantation and clinical nephrology. "The Hospital de Clínicas is the only center responsible for training postgraduates in nephrology in Uruguay. Continuous education has a great influence on the future of nephrology and has really brought the region together," explains Oscar Noboa, Secretary of the Sociedad Latinoamericana de Nefrología e Hipertensión.

ISN Regional Workshops

ISN Regional Workshops in 2011, with one meeting take place in each region every two years. The first cycle of eight Regional Workshops was completed in December 2012, with the second cycle already beginning in 2013.

Region	1st Workshop 2011/12	2 nd Workshop 2013/14
Africa	AFRAN, Dakar, February 2011	AFRAN, Accra, February 2013
Russia & CIS	Russian Dialysis Society, Moscow, November 2011	Russian Dialysis Society, Moscow, November 2013
Latin America	SLANH, Chile, March 2012	SLANH, Chile, August 2014
Central & Eastern Europe	ERA-EDTA Congress, Paris, June 2012	BANTAO, Timisoara, October 2013
Oceania & SE Asia	International Congress of Peritoneal Dialysis, Kuala Lumpur, September 2012	
North & East Asia	Chinese Society Nephrology, October 2012	
South Asia	Indian Society of Nephrology, December 2012	Indian Society of Nephrology, Kolkata, December 2014
Middle East	CME, Dubai, December 2012	CME, Dubai, December 2014

Workshops were added to scheduled CMEs or regional meetings. ISN Program leaders and chairs of the Regional Committees plan and run each workshop for two to three hours.

The workshops are open to all and include a review of ISN Programs available in the region and an open question and answer session designed to obtain on site feedback from individuals in the region on how the programs can better meet their needs.

These workshops provide a unique opportunity for leaders of ISN Programs in each region (Regional Committees, Fellowship, Sister Renal Center, CME) to plan a coordinated approach for the next two years in their area.

The table above reveals the number of ISN Workshops and CMEs that have taken place between 2011-2014.



The future: 2015-2017

The goal of the ISN Programs is to build sustainable capacity in nephrology in low-resource settings. We can achieve this more effectively when the five ISN Programs are developed in a coordinated and integrated fashion. Over the next two years the programs will be working even more closely with each other, and with Regional Boards and Topical Committees so that we can be better at focusing our efforts and resources where the need is greatest and there is the best chance of success.

We are very encouraged by the growing partnership funding for our programs; we are supported by some of our affiliated societies, by other academic organizations, by individuals, and also by a variety of 'non-profit' and 'for profit' organizations. Over the next two years we will continue our efforts to increase this support, which at present provides a 30% uplift to the ISN Programs budget.

In the next couple of years, the ISN Programs leadership will continue efforts to provide meaningful quantitative evidence of the impact and success of the programs. We know this is critical to the proper appreciation of the achievements of our programs by ISN members, by the wider nephrology community, and by external funders.

Finally, ISN staff will continue to streamline the management of the programs, ensuring we are as efficient as possible, and that funds are distributed promptly and transparently.



John Feehally
ISN Programs Chair



Nobody should die of preventable and treatable Acute Kidney Injury (AKI) by 2025!

This was the clear and defined announcement made by ISN when launching the Oby25 Initiative in Hong Kong in June 2013. The Oby25 Initiative calls for globally applicable strategies that permit timely diagnosis and treatment of AKI for patients with potentially reversible diseases.

Oby25 Focus

Oby25 is a global initiative with an emphasis on emerging countries in Africa, Asia, and Latin America with disadvantaged populations and poor access to care. In many cases, AKI is preventable and treatable with few if any long-term health consequences. However, the lack of early identification and treatment in many countries – both in the developing and developed world - means that patients in these regions don't receive essential care before it is too late.

Oby25 Objectives

To achieve its ambitious goal, Oby25 has set out the following strategic objectives:

- Demonstrate the global burden of AKI by collecting and leveraging existing and prospective data.
- Raise awareness of AKI in the global healthcare community.
- Develop a sustainable infrastructure with need-driven approaches to education, training and care delivery.

Oby25 Achievements

In September 2014, ISN launched the AKI “**Global Snapshot**”, a groundbreaking global cohort study on AKI. The web-based prospective data collection took place from September to December 2014 with several hundred participating centers from over 90 countries around the world [see map below]. The results of the study will be presented at the World Congress of Nephrology in Cape Town in March 2015.



AKI Global Snapshot

Other key achievements of the Oby25 Initiative include:

- **Profiling “Oby25” and highlighting the need for action on AKI through proactive communications.** This includes the development of an academic paper on Oby25, to be published in the Lancet in March 2015, and the creation of a dedicated online platform for the initiative. The website - www.Oby25.com - is now the hub for all Oby25 activities and communications.
- **Collaboration with the Institute for Health Metrics and Evaluation (IHME) at the University of Washington, Seattle** has resulted in the decision to include AKI in the 2014 Global Burden of Disease report.
- **Initiating key work in the areas of awareness raising and implementation** by developing frameworks for the in-hospital and out-of-hospital settings, assessing the potential role of new diagnostics and telemedicine, and understanding the readiness of selected governments for pilot projects.
- **Developing a strong network of Oby25 supporters and partners** worldwide as well as receiving endorsement of the initiative from key regional and national nephrology societies.

The Future

During 2015-2017, the Oby25 initiative will continue to build on the achievements to date and will focus on promoting awareness of AKI across the global healthcare community, including among patients and governments. It will also prioritize the development and implementation of targeted pilot projects with the aim of testing globally applicable strategies for AKI that permit timely access to diagnosis and treatment.

AKI should no longer be a death sentence!

Ravindra Mehta, Oby25 Project Leader
Giuseppe Remuzzi, ISN President (2013-2015)

For more information about the initiative or to get involved, please go to www.Oby25.org.

Saving Young Lives

In 2012, ISN joined forces with IPNA, ISPD and SKCF to develop an exciting new cooperative project in Africa and South East Asia, called 'Saving Young Lives' (SYL). Its goal is to establish sustainable programs in low resource settings for the management of acute kidney injury (AKI) including acute peritoneal dialysis (PD).

Children and young adults continue to die in large numbers in the developing world as a direct result of acute AKI, which in many cases is a preventable and treatable condition with few if any long-term health consequences. The most common causes continue to be volume depletion following acute gastrointestinal infections, and malaria, as well as obstetric complications. Much of AKI is preventable with simple treatments including fluid replacement in the home or in a local healthcare facility. For those who require specialist care in hospital, acute peritoneal dialysis (PD) is ideal because of its technical simplicity.

ISN, IPNA, and ISPD contribute their expertise to the SYL project in providing education, training, and capacity building – but these three organizations are not involved in helping to meet the direct costs of patient care. It is SKCF, the Sustainable Kidney Care Foundation, which is using its expertise and resources to ensure that PD catheters and PD fluid are made available in the centers, and that provision of these supplies is sustainable.

SYL is an ambitious project – we are now in the process of establishing 12 hospital centers offering acute PD in very low resource settings. At present, 7 of these sites are already treating children. We also intend to focus on training and education in the community to improve awareness of AKI, equip local health practitioners for prevention and early care of AKI, as well as identify cases needing hospital care.

The SYL project has received five years of funding from a charitable foundation (2012-2016) and our goal is that the centers we are able to establish will provide a model for the development of similar programs in many other low and middle income countries across the world.

We are optimistic that this project will provide a template for sustainable AKI care which will be developed all over the world in low resource settings.

John Feehally
ISN Programs Chair



World Kidney Day



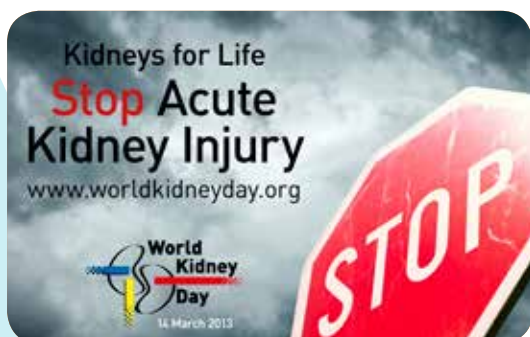
Celebrated on the second Thursday in March, the mission of World Kidney Day (WKD) is to raise awareness of the importance of our kidneys to our overall health and to reduce the frequency and impact of kidney disease and its associated health problems worldwide.

Objectives

- Raise awareness about our “amazing kidneys”.
- Highlight that diabetes and high blood pressure are key risk factors for Chronic Kidney Disease (CKD).
- Encourage systematic screening of all patients with diabetes and hypertension for CKD.
- Encourage preventive behaviours.
- Educate all medical professionals about their key role in detecting and reducing the risk of CKD, particularly in high-risk populations.
- Stress the important role of local and national health authorities in controlling the CKD epidemic. Health authorities worldwide will have to deal with high and escalating costs if no action is taken to treat the growing number of people with CKD. On World Kidney Day all governments are encouraged to take action and invest in further kidney screening.
- Encourage Transplantation as a best-outcome option for kidney failure, and the act of organ donation as a life-saving initiative.

World Kidney Day is now the most successful effort to raise awareness about the impact of kidney disease among policymakers and the general public. Every year, supporters get more creative in finding ways to engage people and help this important cause. Since its inception, World Kidney Day has grown dramatically to become the most widely celebrated event focused on kidney health around the world.

WKD 2013 – Kidneys for Life – Stop Kidney Attack

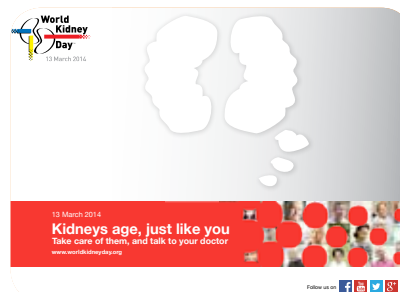


World Kidney Day 2013 was once again a success with 542 events in 157 countries. Country participation had grown fast in a very short time compared to 11 countries taking part in the first

World Kidney Day in 2006. This time, the most active countries were USA, India, Canada, UK, Malaysia, Thailand and Brazil. Acute Kidney Injury was a theme that was embraced globally. Social media sites were buzzing: 2,520 active WKD friends on Facebook, more than 8,000 views of the WKD video, and 1,576 followers counted on Twitter. During this campaign, World Kidney Day received more recognition from policy makers. There was active participation from Ministries of Health in a growing number of countries. World Kidney Day was also officially endorsed by the European Medicines Agency and recognized by the US National Institutes of Health and US Centers for Disease Control.

In recent years, the nephrology community has been joined by other medical colleagues in recognizing the urgent need to increase awareness about AKI amongst physicians and hospital staff. It has also urged for a more public awareness campaign which could demystify this dangerous condition and make it recognizable to the public in a similar way that heart-attack or stroke campaigns have done. By focusing on AKI, ISN and IFKF together with the World Kidney Day Steering Committee hoped to raise awareness of AKI and stimulate discussion, education and policy development leading to improved prevention and treatment of this major kidney disease across the globe.

WKD 2014 – Kidneys age, just like you



March 13th, 2014 marked the ninth World Kidney Day (WKD) – a day of global action which successfully brought together patients, medical professionals and government health authorities to raise awareness of the dangers of kidney disease.

WKD 2014 was no exception. Medical communities and the general public got together to support the cause. There were free screenings, street demonstrations, ministerial meetings, cooking competitions, company events, charity dinners and lectures to name a few. The theme for the 2014 campaign focused on Chronic Kidney Disease (CKD) in aging populations because CKD is more prevalent in the elderly and a major risk multiplier in patients with diabetes, hypertension, heart disease and stroke.



In 2014, the WKD Champions brought the campaign closer to local doctors and increased its impact in all regions of the world. 38 Champions from 22 different nationalities helped the WKD community grow through their networks. They spread the word on social media, helped organize events and served as advocates with local health authorities. Their presence was particularly effective in building the glass of water campaign. Some 15,300 people raised a glass of water for healthy kidneys, posting pictures on Facebook and Twitter. A great start to a new initiative in this campaign. Pictures definitively spoke louder than words as they revealed the success of the day, gathering people from all corners of the globe to shout about healthy kidneys and building momentum for 2015.

WKD 2014: facts and figures

- Over 560 events were organized in over 100 countries.
- 18,500 Facebook fans.
- Support from health ministries in over 30 countries.
- Top five most active World Kidney Day countries were India, United Kingdom, United States, Canada and Argentina. New countries that took part in 2014 included Bhutan, Kosovo, Fiji, Macedonia and Yemen.
- The WKD 2014 editorial was published in 45 journals.
- The campaign was endorsed by the British Medical Journal, Centers for Disease Control and Prevention, National Institutes of Health and the Pan American Health Organization.

WKD 2015 – Kidney Health for all



WKD 2015 marks the 10th Anniversary of World Kidney Day. The 2015 theme “Kidney Health for All” reminds us that not all of us are equal with regards to risk for kidney disease and access to treatment.

Some communities in both higher and lower income countries are at greater risk than others because of their ethnic origin, socioeconomic status and/or where they live. This has major public health implications because of the extremely high costs of renal replacement therapy. African, American Indian, Hispanic, Asian or Aboriginal populations are known to suffer from higher rates of diabetes and high blood pressure which are both leading causes for Chronic Kidney Disease (CKD). These populations are therefore at higher risk of developing severe renal disease and ultimately kidney failure. As an example, in the US, African Americans are 3 times more likely to experience kidney failure. Compared with Caucasians, African Americans have a much

higher average blood pressure, develop hypertension earlier in life and have greater risks of complications such as CKD, stroke and heart disease.

In addition, there are a number of key issues and challenges in tackling Chronic Kidney Disease in vulnerable populations: poor water hygiene, lack of hydration, unhealthy choice of food and beverages, language barriers, education and literacy levels, low income, unemployment, lack of adequate health insurance, and certain culture-specific health beliefs and practices – just to name a few.

This World Kidney Day campaign focuses on raising awareness about this issue, while continuing to encourage the importance of living more healthily. Taking steps to live a healthy lifestyle drastically helps to reduce risk of kidney disease, and its progression to kidney failure.



World Kidney Day is a joint initiative of the International Society of Nephrology (ISN) and the International Federation of Kidney Foundations (IFKF).

WKD Steering Committee (2013-2015)

- Guillermo Garcia Garcia (Mexico) IFKF Co-Chair
- Philip Li (Hong Kong) ISN Co-Chair
- William Couser (USA)
- Timur Erk (Turkey)
- Charles Kernahan (United Kingdom) IFKF Project Director
- Charlotte Osafo (Ghana)
- Miguel Riella (Brazil)
- Luca Segantini (Belgium) ISN Project Director
- Paul Shay (Canada)
- Elena Zakharova (Russia)

WKD Secretariat

- Sophie Dupuis, Campaign Manager
- Agnese Ruggiero, Campaign Coordinator
- Rik Bollaert, Fundraising

ISN World Congress of Nephrology (WCN)



WCN 2013 - Hong Kong

Two years in the making, the ISN World Congress of Nephrology (WCN) 2013 welcomed some 5,900 participants, representing 124 countries. 1,755 abstracts were accepted for poster presentations and more than 95 discussion moderators were on hand to discuss posters.

Sustainability and diversity was the chosen theme, with almost 200 expert speakers participating in a groundbreaking program for what has become the leading biennial educational event in international nephrology. This would not have been possible without valuable support from the Hong Kong Society of Nephrology and the Asian Pacific Society of Nephrology who were hosts and partners at the congress.

With an amazing opening ceremony full of emotion and information, WCN 2013 started off with a fanfare. A special welcome video message from World Health Organization Director General Margaret Chan symbolized a great start to the congress where she highlighted and praised ISN's important mission and role in advancing kidney care worldwide. Mr. Chun-Ying Leung, Chief Executive of the Hong Kong Special Administrative Region, who welcomed congress delegates, emphasized the importance of hosting the congress in Hong Kong.

The scientific program expertly constructed by Carol Pollock and her Scientific Program Committee reflected the diversity of kidney care around the world by emphasizing the very best of contemporary renal science whether in the laboratory, in epidemiology, or in the clinic.

Sponsorship and exhibition was a big success with 1,575 square meters net of exhibition space used. There were 70 exhibitor booths (including 13 from ISN Affiliated Societies) and 12 sponsored lunch symposia.



Committees

Congress Organizing Committee

John Feehally, United Kingdom
Philip Kam-Tao Li, Hong Kong
Carol Pollock, Australia
Adeera Levin, Canada
Charles Swanepoel, South Africa
Luca Segantini, Belgium
Wessel Nieuwenweg, Belgium

Local Organizing Committee

Philip Kam-Tao Li, Hong Kong
Andrew Koon-Shing Choi, Hong Kong
Samuel Ka-Shun Fung, Hong Kong
Chi-Bon Leung, Hong Kong
Zhi-Hong Liu, China
Wai-Kei Lo, Hong Kong
Sing-Leung Lui, Hong Kong
Siu-Ka Mak, Hong Kong
Cheuk-Chun Szeto, Hong Kong
Yasuhiko Tomino, Japan
Sydney Chi-Wai Tang, Hong Kong
Matthew Kwok-Lung Tong, Hong Kong
Andrew Kui-Man Wong, Hong Kong

Scientific Program Chairs

Carol Pollock, Australia
Kai-Uwe Eckardt, Germany
Philip Kam-Tao Li, Hong Kong



ISN Awards and Prize Winners at WCN 2013

Jean Hamburger Award

David Salant

Jean Hamburger Award recognizes outstanding research in nephrology with a clinical emphasis.

Alfred Newton Richards Award

Susan Quaggin

Alfred Newton Richards Award recognizes outstanding basic research in fields relevant to nephrology.

Roscoe R. Robinson Award

Norbert Lameire and Haiyan Wang

Roscoe R. Robinson Award was established to acknowledge outstanding achievements in the field of education in nephrology and medicine.

The Lillian Jean Kaplan International Prize

Vincent Gattone and Dorien Peters

Lillian Jean Kaplan International Prize recognizes a medical professional or researcher exhibiting excellence and leadership in Polycystic Kidney Disease research.

ISN Bywaters Award

Bruce A. Molitoris

Bywaters Award recognizes outstanding contributions to the understanding of acute renal failure.

ISN World Congress of Nephrology 2015



WCN 2015 takes place from March 13 - 17, 2015 in Cape Town, South Africa – the first WCN in Africa. WCN 2015 is hosted by the South African Renal Society (SARS) in partnership with the African Association of Nephrology (AFRAN) and the Renal Care Society of South Africa (RCSSA), and is supported by the International Pediatric Nephrology Association (IPNA) and the African Pediatric Nephrology Association (AFPNA).

The underlying themes of sustainability and diversity are again highlighted following on the success of WCN 2013 in Hong Kong and WCN 2011 in Vancouver. It is a unique opportunity to share views on a wide variety of nephrology topics related to patients suffering from kidney disease globally.

Some key highlights of WCN 2015 include:

- A mix of cutting edge medical science notably in plenary lectures and educational courses that meet the unmet needs of countries around the world. It is the first time that educational tracks run over the full Congress.
- French and English CNE sessions reflecting the diversity of Africa making new knowledge more easily accessible.
- Cutting edge medical progress translated at the bedside for major disorders of Africa and emerging countries such as hypertension, chronic kidney disease, diabetes, pregnancy related disorders, water-related disorders and infectious diseases.
- Special session on hemorrhagic fevers including Ebola and Hantavirus infections.
- Lectures showing that the genetic revolution has entered real life and already influences diagnostic strategies.
- Strong emphasis on pediatric disorders with several sessions intermingling issues common to adult and pediatric nephrology. First WCN ever with so many pediatric themes.
- Allied Health Professionals Symposium (first time at a WCN) in recognition of these crucial members of the CKD treatment team.

The scientific themes for WCN 2015 are 1) Infectious and non-infectious risk factors; 2) Acute kidney injury (AKI); 3) Translational and clinical nephrology; 4) CKD and its consequences; 5) Dialysis and transplantation.

www.wcn2015.org

The Future

The next WCN takes place in Mexico City, Mexico from April 21 - 25, 2017. WCN 2017 will be hosted in partnership with the Sociedad Latinoamericana de Nefrología e Hipertensión (SLANH) and other local or regional societies to be confirmed.

ISN continues to connect 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.



ISN Nexus Symposium

The Vital Link between Research and Clinical Practice

Through its innovative ISN Nexus symposia, ISN has taken the lead in anticipating the needs of academic and clinical nephrologists worldwide. The essence of the ISN Nexus format is to bridge the gap between “the lab bench and the clinical bedside”. ISN continued its mission to translate basic research findings into best clinical practice and extended nephrology into interrelated disciplines by exploring the connection between bone and the kidney and other areas.

In 2014, ISN took on the challenge of holding two ISN Nexus symposia. The first, held in April in Bergamo (Italy), focused on the New Era of Drug Discovery and Clinical Trials in Kidney Disease. This exciting symposium provided cutting-edge lectures on recent advances in drug discovery and clinical trials in kidney disease and brought together scientists in academia and pharma, clinicians and regulators to define new frameworks towards efficient drug discovery and clinical trials in kidney disease. The second, held in Brisbane (Australia) in September, focused on Hypertension and the Kidney, highlighting the latest advances in unraveling the role of the kidney in hypertension featuring a range of clinically relevant topics including the kidney as a requisite cause of hypertension, the role of the immune system in hypertension, the rationale behind evolving guidelines for treatment of hypertension in patients with kidney disease and much more.

Both Symposia were successful, attracting a total of almost 500 delegates from all over the world, and over 90% of participants were satisfied that the symposium’s content had been of great value to their activities.

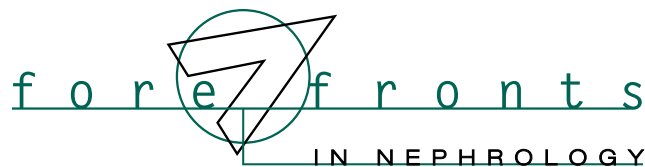
The Future

The next ISN Nexus Symposium, scheduled for April 14 - 17, 2016 in Berlin (Germany) will be on Translational Immunology in Kidney Disease. This meeting will bring together basic and clinical scientists as well as industry partners to present and discuss the future of immunosuppressive and immunomodulatory drugs in kidney disease. How to select the best molecular targets and to overcome the problems in translational research, the limitations in clinical trial design, and the implementation of novel drugs in clinical practice will be discussed.

www.isnnexus.org



ISN Forefronts Symposium



The ISN Forefronts concept is a long-established part of the ISN educational program, having been initiated in 1984. Since its inaugural symposium, ISN has launched more than 30 Forefronts symposia worldwide which has since evolved into an innovative forum to advance scientific nephrology.

The key concept of the ISN Forefronts Symposia is to enhance nephrology research by bringing together leading researchers from different disciplines working in a specific field to stimulate collaborative projects and working activities. Attendance is limited to a maximum of 150 working scientists in order to allow in-depth coverage of a topic and to provide an intimate environment for an open exchange of ideas.

An additional goal is to stimulate younger scientists by exposing them to cutting-edge research. To facilitate this opportunity the ISN offers travel grants and scholarships.

In 2013, an ISN Forefronts Symposium took place in Florence Italy from September 12 to 15. This symposium on Stem Cells and Kidney Regeneration helped provide a greater understanding of the mechanisms that control renal progenitor fate and function which represents a crucial step for translating kidney regeneration into the clinic and initiating the age of regenerative nephrology.

In 2014, two ISN Forefronts symposia were held. The first, which took place in Charleston (SC), USA, March 6-9, focused on Intrinsic Regulation of Kidney Function. The goal of this meeting

was to bring together scientists that study intrinsic regulation of renal function or are interested in exploring its potential to identify new mechanisms and targets relevant to kidney disease. The second, held in Boston (MA), USA, September 11-14. The subject, the Genetic Basis of Renal Disease, aimed to showcase for basic and clinician scientists the most recent developments in genetic approaches to chronic kidney disease, by spreading a better understanding of the genetic mechanisms and harnessing the related rapidly evolving genetic techniques to generate new mechanistic and clinical insights.

The Future

The ISN Forefronts Symposia continue to be developed by a committee chaired by Kai-Uwe Eckardt.

The next ISN Forefronts Symposium will take place in Shenzhen, China from October 2 to 25, 2015. This symposium on Immunomodulation of Cardio-Renal Function will focus on cardio-renal pathophysiology and its links with immunopathology and inflammation to, among others, gain a better understanding of the pathophysiological basis of the link between inflammation in CKD and cardiovascular disease.

www.isnforefronts.org



Disseminating Science, Knowledge and Insights

ISN Publications, 2013 – 2015

ISN publications continue to be a pivotal activity for the Society, both in the production of scientific and educational material that is highly valued by the ISN membership and others around the world interested in nephrology, and as an important source of revenue supporting ISN's outreach and other programs. The last two years have seen substantial growth in both quality and accessibility of ISN's publications.

Under Detlef Schlondorff as Editor-in-Chief and his hardworking team of editors, **Kidney International** has continued to gain stature, with a steady growth in its impact factor (2014 IF 8.52) keeping it a close second amongst all nephrology journals. The quality of its published basic and clinical science remains exemplary, as does the growth in the worldwide relevance and accessibility of its clinical articles. Highlights from *Kidney International* are published regularly on the ISN Education webpage. Foreign language editions, in Chinese and Japanese, greatly extend the reach of the journal.

Kidney International Supplements, the companion journal of *Kidney International*, features papers from conferences and other meetings from around the globe. With its scope complementing

and extending that of *Kidney International*, it has attracted an impact factor of its own.

Both *Kidney International* and *Kidney International Supplements* now accept open access manuscripts. Authors from developing countries are protected by substantially lower, and in some cases zero publication charges. Following a lengthy and rigorous process, ISN has chosen Elsevier as the new publisher of *Kidney International* and *Kidney International Supplements*, starting in January 2016. The contract with Elsevier is a generous one, which will safeguard ISN's ability to support its broad range of global programs and to achieve its mission of advancing global nephrology.

From the beginning of 2016, ISN and Elsevier will launch an **open access journal** which will be devoted largely to high quality clinical manuscripts. Jai Radhakrishnan will be the inaugural Editor-in-Chief of this new journal, which will be linked closely to *Kidney International*.

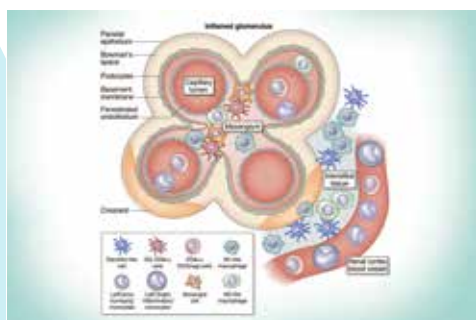
Nature Reviews Nephrology is highly valued by members of ISN. NRN is owned by Nature Publishing Group and with ISN's switch in publisher from 2016, its future relationship with ISN is uncertain. ISN will ensure that its members continue to receive the benefits of NRN, or a similar source of nephrology news and views.

In the future, ISN publications will be even more integrated with ISN Education to provide ISN members with a high-quality flow of timely information and interactive educational opportunities.

All in all, ISN publications continue to be a source of pride within ISN, and to contribute greatly to the Society's ability to maintain and expand its growing range of philanthropic programs.

OFFICIAL JOURNAL OF THE INTERNATIONAL SOCIETY OF NEPHROLOGY

kidney
INTERNATIONAL



VOLUME 85 | ISSUE 5 | MAY 2014
<http://kidney-international.com>

Which is more important -
HD frequency or time?
New regulator of RNase
7-mediated LTI protection
FGF23-Klotho promote
phos-induced calcification
Liver is source of renal AI
after podocyte injury



David Harris
ISN Publications Committee Chair

ISN Education

ISN Education is a web-based resource added to the ISN website in mid-2012. ISN Education's audience is very international, with visits coming from 160 countries across 5 continents, most of which are from the US, India, Japan, Brazil and the UK.

The content is designed for nephrologists and nephrology trainees in both the developing and developed world. Visitors to the website are not just limited to ISN members and include a much broader group of individuals interested in treating patients with kidney disease.

The development of *ISN Education* was masterminded by ISN Education Committee Chair, David Harris. Tushar Vachharajani was appointed as Editor of ISN Education in December 2012 and joined Ariane Brusselmans, the Manager of ISN's education program, Web Content Manager Kelly Hendricks and Jordan Weinstein who is responsible for much of the behind-the-scenes technical expertise, to provide day-to-day management of the website. They are supported by an Editorial subcommittee that includes nephrologists Jai Radhakrishnan and Vivek Jha, the Education committee, and a wide group of contributors.

Over 700 content pieces currently exist on *ISN Education*; the number and style of content is constantly evolving to ensure it is responsive to the latest educational needs in nephrology.

With the support of nephrologists such as Nathan Levin, ISN has been able to partner with a number of organizations to enhance the appeal and volume of its content; these organizations include KDIGO, DOPPS, Cochrane Collaboration and a number of other nephrological groups, societies and industry partners. Much of the material on *ISN Education* is obtained from members, leaders and topical committees of ISN; such as important pathology slides obtained from Agnes Fogo, Chair of the ISN's Pathology Committee.

By clicking on **<Education>** at the top of the ISN website (www.theisn.org) you will immediately see the comprehensive range of educational resources. Resources are grouped and can be searched among 18 **<Topical Channels>**, the latest being "Anemia, Iron and Trace Elements". The next section is **<Ask the Expert>** which is open to all visitors to the website to ask questions of a large panel of ISN members and leaders with particular expertise. **<Books>** includes selected chapters from new nephrological textbooks. A small committee spearheaded by Sarala Naicker and being taken over by Valerie Luyckx in 2015 runs the **<Global Outreach Postings>** initiative. This program helps nephrologists from emerging countries to have their research reviewed and published both on *ISN*

Education and in *The Open Urology & Nephrology Journal*, published online by Bentham OPEN.

The **<Guidelines>** section reproduces important international nephrological guidelines from organizations such as KDIGO and ISPD, with accompanying commentaries from experts. Some guidelines are available in several languages.

<Histopathology Images> includes an enlarging collection of high-resolution histopathology images of native and transplant kidney diseases. A collection of videos of nephrological interventions and procedures can be found by clicking on **<Interventional Nephrology>**.

Selected articles from *Kidney International* are presented in **<KI Editor's Picks>**, some of these also in Chinese and Japanese. Under **<Meetings>** there is a broad selection of presentations and talks from various ISN events and other meetings organized by ISN members.

Following recent success with live presentation of talks from one of these meetings, there will be an increasing number of live and interactive on-line presentations in the future.

The **<Web Directory>** consists of a handpicked selection of important nephrology resources. Finally, monthly **<Webinars>** are a new feature available since early 2014, run by ISN experts and followed by live Q&A sessions. Past webinar webcasts are also available for viewing in this section.

The scope of material presented on *ISN Education* is being broadened in response to feedback from website visitors. New topics and new features will be added continuously with the aim of keeping the website contemporary, vibrant and interactive.



David Harris
ISN Education Committee Chair



ISN Membership – Members make a Difference

ISN members work in collaboration with other nephrologists and help advance kidney care around the world. In addition, members receive many valuable benefits that significantly help them personally and professionally. They experience and support the ISN activities that contribute to improving the conditions and outcomes of people living with kidney disease. They learn more about new and diverse cultures and health care systems, giving them a better understanding of worldwide nephrology issues. And, by taking part in capacity-building programs, ISN members develop and contribute to renal knowledge within local communities and enhance their scientific knowledge through the diverse ISN education activities.

Being part of ISN is not just about what members receive as part of their membership but also what they give. Members' involvement contributes to the Society's philanthropic and humanitarian activities, which greatly influence kidney disease diagnosis and treatment globally.

Membership Benefits

Depending on the membership category, ISN members continue to receive:

- Access to leading scientific journals in nephrology such as *Kidney International* and *Nature Reviews Nephrology*
- Reduced rates at world-renowned events including ISN World Congress of Nephrology, ISN Nexus Symposium and ISN Forefronts Symposium
- Access to ISN educational and collaborative resources including ISN Education and the ISN Member Directory
- Eligibility for ISN capacity-building programs through the ISN Programs and society committees
- Access to society news and nephrology updates through ISN News, ISN e-Update, ISN Gateway and ISN social media

Membership Categories and Fees

ISN offers five main membership categories, which include:

- Individual Member - For any physician or scientist who has manifested a scientific or clinical interest in nephrology.
- Member in Training – For trainees in nephrology aged 37 and younger.
- Associate Member – For renal health professionals such as dietitians, nurses, pharmacists, social workers, and technicians.
- Joint Member – For individuals from developing countries enjoying a group membership.
- Collective Member – For nephrology societies who sign up their members collectively.

Free Membership for Members In-Training

To further encourage the younger generation to get involved in nephrology, ISN started offering free membership in 2014 to all those in training to become nephrologists. ISN has put great efforts into getting more young nephrologists involved through its programs, meetings, publications and committees. Since its establishment, the ISN Young Nephrologists Committee (YNC) has set out to empower younger generations with programs geared at education, mentoring and support. So in 2014 trainees in nephrology, aged 37 and younger, were encouraged to apply for the free ISN In-Training Membership. In-Training Members receive all member benefits except print copies of *Kidney International*.

Collective Membership

The Collective Membership category allows nephrology societies to sign up all or part of their members collectively. Societies who wish to be eligible for the special annual rate sign up at least 75% of their total membership. These members are entitled to all benefits of a regular individual membership.

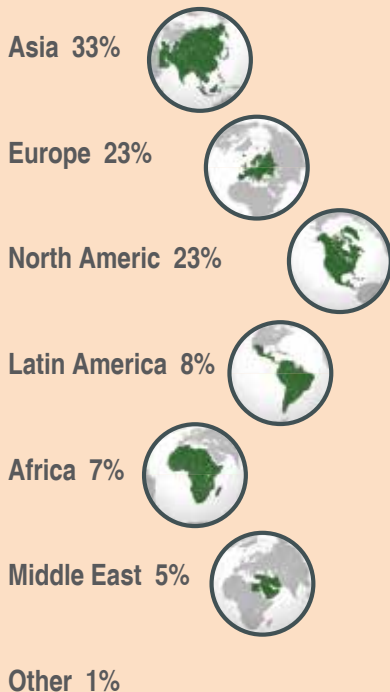
ISN has formed collective memberships with the below national societies:

Australian & New Zealand Society of Nephrology (ANZSN)
Canadian Society of Nephrology (CSN)
Chilean Society of Nephrology
Dutch Federation of Nephrology (NfN)
Hong Kong Society of Nephrology (HKSAN)
Iranian Society of Nephrology
Israeli Society of Nephrology & Hypertension (ISNH)
Peruvian Society of Nephrology
South African Renal Society (SARS)
Spanish Society of Nephrology (SEN)
Swiss Society of Nephrology (SSN)

Membership Breakdown

With about 9,000 members from 130 countries, ISN represents a wide international network across practice and activity areas.

Geographic Breakdown



Primary Practice (multiple answers)

Teaching Hospital	57%
Government Hospital	33%
Dialysis Clinic	17%
Private Hospital	14%
Individual Practice	6%
Group Practice	6%

Area of Activity (multiple answers)

Clinical Practitioner	70%
Clinical Researcher	37%
Teacher/Educator	25%
Basic Researcher	12%
Student	8%
Administrator	7%

Professional Interest - Top 10 (multiple answers)

Clinical Nephrology	71%
Dialysis	60%
Chronic Renal Failure	58%
Acute Renal Failure	54%
Hypertension	49%
Transplantation	41%
Diabetes	36%
Peritoneal Dialysis	32%
Anemia	29%
Interventional/Critical Care Nephrology	28%

“Not only does ISN provide a great platform for scientific exchange, but it also works incredibly hard to help alleviate kidney health inequality worldwide.”

Thomas Coffman (USA)

James R. Clapp Professor of Medicine, Chief of the Division of Nephrology, Senior Vice-Chair in the Department of Medicine, and Founding Director of the Duke Cardiovascular Research Center at Duke University Medical Center

“ISN runs some truly remarkable capacity-building programs engaging the worldwide nephrology community in its mission of advancing kidney care around the world.”

Roberto Pecoits-Filho (Brazil)

Professor of Nephrology and Director PhD and Master Programs in Health Sciences, School of Medicine, Pontifícia Universidade Católica do Paraná

“Collaboration with colleagues all over the world is a privilege and one of the most rewarding aspects of my work. ISN provides an excellent structure for that.”

Kai-Uwe Eckardt (Germany)

Professor of Medicine and Head of the Department of Nephrology and Hypertension at the University of Erlangen-Nuremberg

Report from the Treasurer

I only took over from the previous Treasurer, Dr. Thomas Coffman, in May 2014, and I was impressed by the soundness of ISN's financial position. Despite several years of worldwide economic stagnation, our Society seems to have weathered the slump in a seamless way. The main financial indicators for a not-for-profit (membership fees, support from sponsors, events attendance, royalties from publications) have all been sustained or have even improved. Below is a table summarizing these indicators.

Year	Total Revenue	Investment in ISN Programs	Membership Revenue	Publications Revenue	Revenue from Events
2013	\$9,977,830*	\$1,547,250	\$1,402,000	\$2,345,000	\$4,707,425*
2014	\$6,293,045	\$1,507,000	\$1,530,000	\$2,230,000	\$1,145,905

* = includes WCN 2013

So, I am proud to work with ISN leadership and staff to contribute to medium- and long-term strategy and to manage our finances in the best possible way, both the day-to-day operating budget and the reserves.

One significant achievement in the course of 2014 has been the definition of a landmark agreement for the Kidney International (KI) publishing partner for the next 10 years. KI is ISN's own scientific journal, consistently rated among the top 3 journals in nephrology and urology, and a significant source of revenue for the Society. The end of the contract with our current publisher in December 2015 called for a selection process for the next partner, which was conducted last year. Considering the changes in the scientific publishing landscape and the uncertainty surrounding its potential for revenue-making for scientific societies, I am very pleased that we managed to secure a 10-year deal with one of the leading publishers, Elsevier, which will increase the yearly contribution to ISN finances from Kidney International and position ISN to take advantage from a range of new potentially revenue-making opportunities in the years to come.

Challenges for the next few years will derive from the need to reposition our events and programs to adapt to a changing world, so that ISN is even more successful in delivering its philanthropic activities, which are fundamental in advancing kidney care in emerging countries. The launch of the fundraising platform World Kidney Fund in 2014 is an integral part of this strategy, and we hope that it will contribute to attract the attention of foundations and grant-giving organizations to the unique range of ISN programs, which are ready to deliver even more results if further financing will be available.

Finally, ISN is in the process of reviewing its investment strategy, with a view to maximize its contribution and safeguard its position in the context of turbulent financial markets.



Stuart Shankland, MD
ISN Treasurer

A Message from the Incoming President

Thank you for the opportunity to share my thoughts, goals and aspirations for the ISN, as incoming President 2015-2017. The ISN has a strong base, commitment and suite of activities which has been built over the last 50+ years, through changing times and attitudes: together, we are committed to improving the lives of people living with kidney disease.

The next 5-10 years will likely bring many changes to nephrology specifically, and medicine in general, which are important for ISN to consider and address. The traditional classification of countries and regions as “developed” or “emerging” becomes less and less relevant, in terms of access to care and technology: rather, challenges will be faced by all, and there is a growing number of high-quality leaders and resources in all regions and countries now. There will be more competition to limited resources to support activities and programs, and limited time and human resources to care for patients, teach professionals and conduct research. There will be increasing demands for loyalty and allegiance to local organizations and institutions, and that will need to be balanced with demands from larger volunteer organizations, like the ISN. We will need to be creative, nimble and understanding of these changing times. Over the last 5 years, the ISN has remained dedicated to its core values: people, partnerships and perspectives, bridging these around the world. We will need to even more savvy in the way we select our Programs beneficiaries and in how we seek external support for them.

However, I am confident and reassured by the fact that ISN is an ever-evolving organization, stronger for its collaborative and cooperative spirit, and known for a balanced and coordinated approach to its various activities. As an organization which was born with an international pedigree, it exists and is stronger because of all of the national and regional organizations, their efforts and the efforts of their members. Firmly committed to sustainable education, appropriate teaching, global research, ethical practice and realistic advocacy, the ISN connects all countries and regions in unique and multiple ways.

With your help, and together with the new ISN Executive Committee, I will continue the shepherding of the activities launched by the previous leaderships of the ISN, engage the ISN leadership and all ISN members wisely, to guide future directions. Specifically, one of my main focus areas will be to

enhance the presence and leadership role of ISN in the many collaborative activities it undertakes, by ensuring equitable and ethical involvement of ISN members in important initiatives of advocacy, policy promotion, research and education.

Where do I see the ISN going?

Education, advocacy and research are the fundamental activities that ISN supports. During my Presidency, I see these activities being more coordinated and consolidated, so that we learn how to leverage successes and experiences across geographical boundaries. We will educate in novel ways, in novel locations; we will ‘shepherd’ research initiatives, around CKD, dialysis, AKI, across cohort and clinical trials; and make sure that patients and investigators around the world have access to the best evidence-informed care which is appropriate for their environment and resources. The advocacy role that ISN has played over the last few years, culminating in some important accomplishments, will continue to be integrated into the ‘soul’ of ISN. We will be in a position to shape and influence international policies, foster and interpret comparisons between regions, and ultimately disseminate knowledge, and thereby influence patient outcomes.

I also envision more collaboration with patient and non-physician organizations, so that we can more appropriately represent the current evolution of kidney care by talking to and serving the whole spectrum of nephrology professionals.

The balance of these diverse activities, all of which are ‘branded’ as ISN, will continue to be a challenge. Can we be all things to all people? Certainly no, but we can represent the majority of perspectives at different venues, we can enable different voices to be heard, and we can be a catalyst for change in many parts of the world, keeping in mind that we should privilege the less affluent and the disadvantaged. Working with in a highly nimble and de-centralized structure, and with strengthening of Regional Boards, mentoring of young nephrologists, and engagement of researchers and educators, as well as policy makers, the ISN is clearly in a position to be ‘the’ supportive organization for all nephrologists, irrespective of, and highly complementary (and not competitive) to the local, regional or national societies to which they belong.

The financial viability of all of our philanthropic activities has been, and will remain, a focus for the organization. Learning how to leverage resources from different partnering societies or organizations will always be challenging. Working with the Executive Director, the administrative team at ISN headquarters, and the Treasurer, we will explore novel methods to fund activities, and develop sustainable business plans for each of our key activities.

I am committed to ensuring balanced representation on all committees: different ages, gender, and cultural backgrounds all contribute to enriched decision making in all spheres: we will ensure that all perspectives are brought to ISN activities.

The ISN is a unique organization, and our members serve as ambassadors, teachers, researchers and advocates. As President for the next 2 years, I too, will serve in all these capacities. I will do so in a respectful and inclusive manner, maintaining the integrity of the Society and of our members in all venues. I am looking forward to working with many of you, and to the privilege of helping the ISN to further its goal of improving the lives of people with kidney disease.



A handwritten signature in black ink, appearing to read 'Adeera'.

Adeera Levin
ISN President (2015-2017)

ISN Leadership and Committee Members

On behalf of the global renal community, the ISN extends its thanks to its leaders for their foresight, dedication and commitment to advancing nephrology around the world, and also to the ISN Committee Members who ensure the success of all the Society's most prominent programs and activities.

The ISN Leadership and Committee Members are made up of volunteers selected from the membership and charged with the responsibility of "leading" the Society and "overseeing" its activities.

Executive Committee

Giuseppe Remuzzi (Italy) - President
John Feehally (United Kingdom) - Past President
Adeera Levin (Canada) - President Elect
Ricardo Correa Rotter (Mexico) - Secretary General
Stuart Shankland (USA) - Treasurer
David Harris (Australia) - Publications Committee Chair
Susan Quaggin (USA) - Council Representative
Peter Kerr (Australia) - Council Representative
Bernardo Rodríguez-Iturbe (Venezuela) - Presidential Appointee
Chih-Wei Yang (Taiwan) - Presidential Appointee

Council

Africa

Boucar Diouf (Senegal)
Maher Fouad Ramzy (Egypt)

Asia/Pacific

Sanjay Agarwal (India)
Somchai Eiam-Ong (Thailand)
Sadayoshi Ito (Japan)
Vivekanand Jha (India)
David Johnson (Australia)
Peter Kerr (Australia)
Suhngwon Kim (Republic of Korea)
Zhi Hong Liu (China)
Harun Rashid (Bangladesh)
Chih-Wei Yang (Taiwan)

Europe

Jorge Cannata-Andía (Spain)
Dick de Zeeuw (The Netherlands)
Kai-Uwe Eckardt (Germany)
Meguid El Nahas (UK)
Francesco Locatelli (Italy)
Klaus Ølgaard (Denmark)
Laszlo Rosivall (Hungary)
Irma Tchokhanelidze (Georgia)

Latin America

Mirian Boim (Brazil)
Sergio A. Mezzano (Chile)
Roberto Pecoits-Filho (Brazil)
Laura Sola (Uruguay)

Middle East

Mona Alrukhaimi (United Arab Emirates)

North America

Roland Blantz (USA)
Joseph Bonventre (USA)
Alfred Cheung (USA)
Allison Eddy (USA)
Bertram Kasiske (USA)
Susan Quaggin (Canada)
Marcello Tonelli (Canada)

ISN Topical Advisory Committee Chairs

- Acute Kidney Injury Committee - Ravindra Mehta (USA), Emmanuel Burdmann (Brazil)
- Dialysis Committee - Nathan Levin, Fredric Finkelstein (USA)
- Interventional Nephrology Committee - Miguel Riella (Brazil), Tushar Vachharajani (USA)
- Kidney Health in Disadvantaged Populations Committee - Guillermo Garcia Garcia (Mexico)
- Renal Pathology Advisory Committee - Agnes Fogo (USA)
- Young Nephrologists Committee - Jeff Perl (Canada)

ISN Program Committee Chairs

- ISN Core Programs Committee - John Feehally (United Kingdom)
- CME Program Committee – Fredric Finkelstein (USA)
- Education Ambassador Program Committee - Saraladevi Naicker (South Africa)
- Fellowship Program Committee - David Harris (Australia)
- Clinical Research Program Committee - Marcello Tonelli (Canada)
- Sister Renal Center Program Committee - Paul Harden (UK)

ISN Regional Boards

- Africa Regional Board - Mohammed Benghanem Gharbi (Morocco), Gloria Ashuntantang (Cameroon)
- North and East Asia Regional Board - Minghui Zhao (China), Chih-Wei Yang (Taiwan)
- Eastern and Central Europe Regional Board – Laszlo Rosivall (Hungary)
- Latin America Regional Board – Ezequiel Bellorin Font (Venezuela), Laura Solá (Uruguay)
- Middle East Regional Board - Mona N. Alrukhaimi (United Arab Emirates)
- Oceania & South-East Asia Regional Board - Peter Kerr (Australia), Kriang Tungsanga (Thailand)
- Russia and CIS Regional Board - Elena Zakharova (Russia), Irma Tchokhonelidze (Georgia)
- South Asia Regional Board – Vivekanand Jha (India), Rashid Harun Ur (Bangladesh)

ISN Events Committees

Forefronts Committee - Kai-Uwe Eckardt (Germany)
Nexus Committee - Kumar Sharma (USA)
WCN 2015 Scientific Programme Committee – Pierre Ronco (France)
WCN 2015 Congress Organising Committee - Giuseppe Remuzzi (Italy)

ISN Initiatives Committees

0 by 25 - Giuseppe Remuzzi (Italy)
Advisory Committee for Clinical Trials and Studies - Giuseppe Remuzzi (Italy), Adeera Levin (Canada)
Awards Committee - Giuseppe Remuzzi (Italy)
Education Committee - David Harris (Australia)
ISN-ANIO India Committee - John Feehally (United Kingdom), Ajay Singh (USA)
Nominating Committee – Joanne Bargman (Canada)
Publications Committee - David Harris (Australia)
Renal Disaster Relief Task Force - Raymond Vanholder (Belgium)
Saving Young Lives Committee - John Feehally (United Kingdom)
World Kidney Day Steering Committee – Philip Li (Hong Kong)

Leading through Collaboration and Alliances

AFRICA

African Association of Nephrology
Egyptian Society of Nephrology
Moroccan Society of Nephrology
Nephrology Society of Tanzania
Nigerian Association of Nephrology
South African Renal Society
Tunisian Society of Nephrology

ASIA

Arab Society of Nephrology & Renal Transplantation
Asian Pacific Society of Nephrology
Australian and New Zealand Society Of Nephrology
Bangladesh Renal Association
Chinese Society of Nephrology
Hong Kong Society of Nephrology
Indian Society of Nephrology
Indonesian Society of Nephrology (Ina SN)
Iranian Society of Nephrology
Iraqi Society of Nephrology
Israel Society of Nephrology and Hypertension
Japanese Society of Nephrology
Korean Society of Nephrology
Kuwait Nephrology Association
Lebanese Society of Nephrology & Hypertension
Malaysian Society of Nephrology
Mongolian Society of Nephrology and Urology
Nephrology Society of Thailand
Pakistan Society of Nephrology and Urology
Philippine Society of Nephrology
Saudi Society of Nephrology
Singapore Society of Nephrology

EUROPE

Albanian Society of Nephrology
Austrian Society of Nephrology
Belgian-Dutch Speaking Society of Nephrology
Association for nephrology, dialysis and transplantation
of Bosnia and Herzegovina
British Association of Pediatric Nephrology
Bulgarian Society of Nephrology
Croatian Society of Nephrology, Dialysis & Transplantation
Danish Society of Nephrology
Dutch Federation of Nephrology
Estonian Society of Nephrology

French Society of Nephrology
German Society of Nephrology
Hellenic Society of Nephrology
Hungarian Society of Nephrology
Irish Kidney Association
Irish Nephrology Society
Italian Society of Nephrology
Latvian Association of Nephrology
Macedonian Soc. of Nephrology, Dialysis, Transplantation
and Artificial Organs
Norwegian Society of Nephrology
Polish Society of Nephrology
Portuguese Society of Nephrology
Renal Association
Romanian Society of Nephrology
Slovenian Society of Nephrology
Spanish Society of Nephrology/Fundacion Senebro
Swedish Society of Nephrology
Swiss Society of Nephrology
Turkish Society of Nephrology

NORTH AMERICA

American Society of Nephrology
Canadian Society of Nephrology
Costarican Society of Nephrology
Cuban Society of Nephrology
Guatemalan Society of Nephrology
Mexican College of Nephrologists
Mexican Institute for Nephrological Research
Panamean Society of Nephrology
Puerto Rican Society of Nephrology and Hypertension

SOUTH AMERICA

Argentina Society of Nephrology
Brazilian Society of Nephrology
Chile Society of Nephrology
Colombian Society of Nephrology
Latin-American Society of Nephrology and Hypertension
Paraguayan Society of Nephrology
Peruvian Society of Nephrology
Uruguayan Society of Nephrology
Venezuelan Society of Nephrology

ISN Partners and Support

As one of the leading organizations in providing access to nephrology education and training around the world, ISN cherishes partnerships with non-commercial and commercial entities to deliver its important healthcare mission. ISN's many programs and activities offer countless possibilities for interested partners to collaborate with the Society. Specific opportunities are available via ISN's Publications, Meetings, Capacity Building Programs as well as many others.

Why Partner with ISN?

- **Thought Leaders and Decision Makers around the World:** ISN members are the principal authorities in both basic science and clinical medicine. They are also on the forefront of treating conditions associated with kidney disease such as hypertension and diabetes.
- **Highest Level of Science:** ISN represents the leaders in the field and ISN programs and activities constantly reflect this highest level of science. ISN programs are innovative and focus on providing the participants with the tools to meet their needs.
- **Global Healthcare Mission:** ISN members lead the fight for more effective treatments and recommend new global directions to combat the pending epidemic of noncommunicable cardiovascular, diabetic and renal diseases.
- **Building Capacity and Creating Health Equality around the world:** ISN's programs span the globe and contribute specifically to spread knowledge and help bring access to much needed information, education and clinical care to parts of the world where they are most needed.
- **Making a Difference:** ISN's philanthropic and humanitarian work transforms the lives of people worldwide.

Partnership Opportunities

As one of the leading organizations in providing access to nephrology education and training around the world, ISN welcomes partnerships with non-commercial and commercial entities which share its goals and values. By working together with the ISN, you can directly participate in advancing nephrology worldwide for the benefit of all.

For more information on partnership opportunities, how to support the ISN and donations to the ISN, please contact the ISN.

Donations

Thanks to the generosity of Robert W. Schrier and his family, the ISN Barbara and Robert W. Schrier Fund was established in June 2005. The endowment is used to provide invaluable training and education to nephrologists from developing countries.

The launch of ISN's direct fundraising platform, World Kidney Fund, in 2014 will further reinforce the Society's ability to fund its Programs.

The ISN would like to recognize the following donors for their outstanding financial support and thank the many ISN members who have donated to the ISN over the past years.

Amgen Inc.
Derek and Cecily Schrier
Dipak Patel
Otsuka
Robert W. and Barbara Schrier
Salmasi Family

Corporate Members

The ISN wishes to express its gratitude to its industry members who have generously supported the Society and have engaged in and/or contributed to its activities over the past two years

Without their continued support many of the essential educational and outreach programs and initiatives would not be possible. ISN corporate members include:

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AMGEN


DANONE
NUTRICIA
RESEARCH

 FRESENIUS
MEDICAL CARE

 Roche

SANOFI RENAL 

 Shire

ISN Global Staff

Management

Luca Segantini, Executive Director

Society Management

Marie-Pierre Smal, Senior Coordinator

Christine Rugurika, Administrator

Finances

Lisa Scarfuto, Finance Manager

Jane Gallucci, Finance Administrator

Membership

Katleen Bartnek-Gallagher, Membership Coordinator

Global Outreach Programs

Ariane Brusselmans, Programs Director

Giorgia Manuzi, Senior Coordinator, Programs Liaison

Marie-Pierre Smal, Programs Senior Coordinator

Pooja Soens, Programs Coordinator

Valentina Cagni, Programs Administrator

Marketing and Communications

Jesper Lillelund, Marketing and Communications Director

Andreas Delvaux, Marketing Project Manager

Sally Horspool, Staff Writer

World Congress of Nephrology, Nexus and Forefronts events

Matthieu Van Der Straten, Events Manager

Michael Podt, WCN Consultant

Shira Strachova, Events Coordinator

Piero Segantini, Events Administrator

ISN Education

Ariane Brusselmans, ISN Education Director

Kelly Hendricks, ISN Education Coordinator

Business Development

Rik Bollaert, Business Development Director

World Kidney Day

Rik Bollaert, Project Director

Agnese Ruggiero, Campaign Coordinator

World Kidney Fund

Agnese Ruggiero, Project Coordinator

Saving Young Lives

Ariane Brusselmans, Project Director

Oby25 Initiative

Louise Fox, Project Director

Luisa Strani, Project Manager

In addition to the ISN Global Team, the ISN would like to recognize the following individuals who have played a critical role in the organization of many of the Society's key programs:

Kidney International

Detlef Schlöndorff, Editor in Chief

Patricia Morrissey, Executive Managing Editor

Susan Small, Managing Editor

Website

Jordan Weinstein, New Media Consultant

ISN Education

Tushar Vachharajani, Education Editor

Renal Disaster Relief Task Force

Chantal Bergen

President's Support

Antoinette Van Engelen



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