Editorial

NIGEL TOUSSAINT
ANZSN HONORARY EXECUTIVE OFFICER

It has been a pleasure and privilege to serve as an ANZSN Council member over the last 12 months, especially in the role of Honorary Executive Officer. This has been my first year on Council and I have thoroughly enjoyed the experience and the opportunity to broaden my horizons to the evolving Society’s substantial activities, as well as the numerous challenges continually being faced. I would firstly like to congratulate President Alan Cass for his leadership, and, in consultation with the current Council, for a proposed revision of the Vision, Mission and Value statements of the ANZSN. A Strategic Planning day for ANZSN Council members, which was held in Launceston earlier this year at the time of the DNT meeting, also saw the initiation of a proposed redesign for the ANZSN organisational structure to increase communication with ANZSN subcommittees and strengthen relationships with organisations such as KHA and the RACP. I look forward to being an integral part of this important change within the ANZSN over the next few years during my time on Council.

I would like to take this opportunity to thank Aviva Rosenfeld for her years of tremendous service to the ANZSN. Aviva has been considered by many within the ANZSN to have been the backbone of the Society for many years, with her dedication and hard work behind the scenes. Her efficiency and meticulous work ethic were integral to the organisation of numerous ANZSN and TSANZ meetings and conferences as well as the general oversight of both Societies.
After many years of outstanding service Aviva retired this year and her corporate knowledge will be greatly missed, as well as her enthusiasm and warmth. Aviva was honoured with Life Membership of the ANZSN at the recent ASM in Canberra.

I would also like to thank Anna Golebiowski who, after working as the ANZSN Administrative Officer alongside Aviva for several years, has now stepped into the Executive Officer role and has been doing an incredible job, initially on her own, coordinating all ANZSN business and holding the Society together. I have worked closely with Anna over the last year and want to congratulate her on her tireless efforts in the office.

I would also like to welcome and thank Jourdan Pinnell, who has joined the ANZSN as the Administrative Officer, and is working closely with Anna in helping to run the Society behind the scenes.

There are also many other ANZSN members more broadly who deserve recognition. Members of the DNT subcommittee, SPEC and the Annual Scientific Meeting (ASM) local organising committee for example are among a long list of members contributing to specific necessary tasks and who deserve credit for their hard work and dedication. The ANZSN ASM, held in Canberra in September, was another successful meeting this year showcasing the excellence in local scientific research as well as hosting numerous fantastic international speakers.

The ANZSN membership continues to increase, especially with young members and increasing numbers of nephrology trainees. There are currently 873 ANZSN members, 491 of whom completed the nephrology workforce survey earlier this year as nephrologists or trainees (the latter numbered 88), and a considerable and increasing number of scientists, allied health clinicians and surgeons continue to comprise a large proportion of the membership. Grant funding and awards provided by the ANZSN continue to be substantial, as investment in research and education are maintained as high priorities of the Society.

The upcoming year sees several international nephrology conferences being hosted in Australian cities.

The ISPD meeting is being held in February 2016 in Melbourne and the APCN meeting will be held in Perth in September 2016, in conjunction with the ANZSN ASM. The ANZSN also supported a bid for the WCN in 2019 and, thanks largely to the steering committee for this application, especially through the leadership and enthusiasm of Peter Kerr, Melbourne was the successful bid and will be hosting this event. This is a fantastic achievement and these opportunities reflect the incredible presence Australian and New Zealand nephrology has on the international stage and is a tribute to the dedication and enthusiasm of ANZSN members.

In conclusion, the weekly email update continues to be hugely successful and has certainly enhanced communication amongst ANZSN members. Please continue to send through feedback to the Society - the numerous messages we receive again highlight the passion and enthusiasm of ANZSN members in thinking about their Society and living up to our newly documented Vision to achieve ‘optimal health and wellbeing for people with, or at risk of, kidney disease’.

I am incredibly reassured by the sense of ownership of the Society by our members and constant high level of interest and participation. There is no doubt that the success of our Society comes largely from the incredible willingness and enthusiasm of members to lend their time and expertise under the ANZSN banner.

A/Prof Nigel Toussaint
Honorary Executive Officer
Australian and New Zealand Society of Nephrology
2015 has been a year of change in Australian nephrology. With the sudden departure of Aviva Rosenfeld, Anna Golebiowski has stepped up to provide strong support to Council. Jourdan Pinnell has come on board as our new Administrative Officer and settled in quickly to work effectively alongside Anna. At the same time, Tim Mathew has retired from his long-held position as Medical Director of Kidney Health Australia. This has necessitated a greater effort to sustain and rebuild our relationship with Kidney Health Australia to better support renal patients, clinicians and researchers. In this report, I will highlight a few events and issues that are of some significance to our renal community.

I wish to again note the passing of Priscilla Kincaid-Smith – a giant of Australian and world nephrology. With many other ANZSN members, I attended the very moving memorial service in Melbourne. Being from Sydney, I was less well versed in the stories about Priscilla as a scientist, clinician, mentor and colleague. I came away with a much better understanding of her indelible impact upon nephrology. It was fitting that Kidney Health Australia, with the Health Minister in attendance, launched the Priscilla Kincaid-Smith Research Foundation at our ASM Dinner in Parliament House. With our support, there is very real potential to raise substantial new funding to support kidney research. I urge members to engage in KHA’s current process for discussion regarding priority areas for research funding. If we can facilitate patients, scientists, nurses and nephrologists engaging in this discussion, we can ensure that key issues across the spectrum from discovery of causes of kidney disease and development of novel therapies, through disease prevention, better approaches to treatment and delivery of renal services, will be given full consideration.

We are all aware of the ever-increasing number of applications for research funding through NHMRC. The overall success rate for Project Grants fell below 14% in 2015. In this context, the importance of the KHA initiative to raise additional funding for kidney research is obvious. The Jacquot Bequest, which currently provides approximately $600,000 per year to support research, remains a fundamentally important source of funding for renal research. The kidney research community also looks to the Medical Research Future Fund as an important support for research going forward. Council is keen to share information regarding NHMRC research funding in kidney disease. We ask members who received Fellowship, Project, Partnership Project, CRE or other NHMRC scheme funding, to send relevant information to Anna or Jourdan. We aim to collate and circulate this information to ANZSN members.

2015 saw considerable debate about the vision for ANZSN and the role of our key sub-committees. After in-depth discussion at the AGM in Canberra, the new Vision Statement can be viewed at www.nephrology.edu.au/about/overview.asp. Although discussion is ongoing about their key areas of focus and terms of reference, both HDAC and DNT Committees continue to meet to ensure progress is being made organizing relevant meetings and discussing priority clinical issues. 2016 will be a big year for international renal meetings in Australia. SPEC, under the very able leadership of Angela Webster, is working effectively towards the joint ANZSN—APCN meeting in Perth in September. ISPD will be held in Melbourne in March. Take advantage of having these international meetings in our backyard. Members of the new Council have taken up particular portfolios to represent the interests of ANZSN members.
Paolo Ferrari is organising the joint ANZSN–APCN Meeting in Perth in 2016. Nigel Toussaint as HEO and David Mudge as Treasurer have taken on portfolios with clear and concrete responsibilities. Jonathan Craig is working to strengthen our engagement with KHA. Germaine Wong has taken up the key liaison role with the College. Jeff Barbara is working to organise DNT in South Australia in 2017. Katherine Barraclough is developing an important proposal for consideration by ANZSN to establish a working group to consider environmental sustainability in relation to the delivery of renal services. Murray Leikis always ensures New Zealand members’ interests are given appropriate consideration. I thank all the Council members for their efforts and look forward to Council working effectively together throughout 2016.

Prof Alan Cass
ANZSN Council President
A copy of the audited financial statements for the period ending June 30, 2015 was circulated prior to the Annual General Meeting in September 2015 and summarised in my report at that meeting.

The Society's overall financial position has been maintained, due to solid performance of our assets but despite a reduction in sponsorships. Overall, the ANZSN has been able to continue to grow its assets but maintain a very generous amount of financial support to members through awards and grants. Our investment strategy has shifted slightly to a less conservative approach but with an ongoing view to capital preservation and returns over the long term as we continue to focus on supporting our core activities of education and research.

ANZSN net assets for financial year 2015 remain at $2.9M which is similar to 2014. This year’s small loss was largely due to capital outlays for the upcoming international conferences in 2016. In addition, revenue was significantly down due to reduced pharma sponsorship, which we had anticipated.

Girish Talaulikar and his local organising committee, working in conjunction with SPEC, chaired by Angela Webster, managed an extremely successful Annual Scientific Meeting in Canberra in September and managed to achieve a significant profit for the society.

Sponsorship for international meetings in 2016 including ISPD (Melbourne) and APSN (Perth) has been secured due to a lot of hard work by Fiona Brown and Paolo Ferrari, respectively, and both meetings are forecast to be successful financially for the society next year.

In order to enable Council to predict future cash flow and financial planning, we have engaged our accountant to provide us with a 5-year financial forecast into which we can factor conference expenses, changing membership numbers and revenue, changing pharma sponsorship and the performance of our investment portfolio. We hope to have this plan in place by the end of this calendar year. Council looks forward to a financially successful 2016 and as 2015 draws to a close I wish all members and their families a peaceful and enjoyable festive season.

A/Prof David Mudge
Council Treasurer

ANGELA WEBSTER
CHAIR - SCIENTIFIC PROGRAMME AND EDUCATION COMMITTEE

The 51st ASM and Nephrology Update were held in Canberra this year. The three international invited speakers, Professor John Gill and Professor Bruce Molitoris and Professor Prabir Roy-Chaudhury made substantial contributions to the meeting.

The committee would like to thank the invited local speakers who contributed to the clinical and basic science seminars, specifically David Harris, Tim Hewitson, Carola Vinuesa, Phil Poronik, Carol Wicking, Annemarie Hennessy, Catherine Stedman, and Rachael Morton. The preceding update course was once again run by Vincent Lee, and we are very grateful for all those who contributed and spoke there.

The Society was privileged and very pleased to have members of the Jacquot family Zanette and Ian Brown and Jillian and Arthur Burch in attendance and we continue to acknowledge the contribution of the Jacquot Bequest with presentations from two past Jacquot awardees Suetonia Palmer and Jonathan Gleadle.

An late alteration to the program was made to accommodate a tribute to Priscilla Kincaid-Smith’s great contribution to Australasian nephrology, kindly presented by Judith Whitworth.

This year’s ASM built on the strong format and positive response we had for the 2014 meeting. We again received a record number of abstracts 275 abstracts submitted, 264 accepted) and SPEC believes that the format of prize sessions, selected mini-orals, and posters enhanced the strength of the scientific content presented at the meeting. Allocation of abstracts to all sessions is based on the blinded reviewer scores, with at least six reviewers scoring
each abstract. Informal feedback has been universally excellent regarding the poster viewing session with drinks and discussion around the posters. The one change to the meeting format which we have continued from last year was allocating a separate mini-oral session for the recently formed clinical trainee prize.

The conference attendance was very strong with 464 attendees. SPEC would like to congratulate this year award winners including the ANZSN Young Investigators Dr Huang Do Nguyen (Clinical Science) and Dr Jonathan Dick (Basic Science), Dr Germaine Wong (KHA Clinical Science Award), Angela Makris (Best Scientific Presentation) and Paul Lawton (Rural award). This year we once again awarded a trainee prize as the Shaun Summers award. Dr Shaun Summers was a SPEC member who died tragically in 2013, and Council has agreed that SPEC can continue to award this prize in his name for the term that Shaun would have served on SPEC. This year’s Shaun Summers award was awarded to Samantha Chan.

Thank you to all who contributed this year, especially Dr Girish Talaulikar and the Local Organising Committee, and Dr Vincent Lee, responsible for the weekend Nephrology Update course. As always any feedback on the meeting is welcome, directly to SPEC via email to myself or ANZSN admin staff. I would like to again thank the members of the society for generously giving their time to review abstracts. Thank you also to the Meeting’s Corporate Sponsors, who generously support the ASM so that it can grow and continue to serve the needs of the society.

SPEC Membership Turnover

This year marks my first year as chair, and we welcomed two new members Dr John Irvine and Associate Professor Frank Ierino. We have no further turnover anticipated in 2015, but expect to put out a call for expressions of interest for new members in early 2016, to join the committee in late 2016. Should SPEC agree to take on new responsibilities given the terms of reference revision announced by Council at this year’s AGM, we may seek additional members at an earlier time.

2016 Annual Scientific Meeting and Nephrology Update – Perth, WA

In 2016, the Annual Scientific Meeting will have an unusual format as it will be held as a joint meeting with the APSN in Perth (18th-21st September), with the Nephrology Update Course taking place on Saturday 17th September. To make up for the abbreviated update course there will be three additional update sessions held on the Sunday, Monday and Tuesday as 7am sessions of one hour duration to start the day. The local organising committee responsibilities are being shared between Paolo Ferrari and Wai Lim.

For future meetings, if you come across an excellent speaker at any international meeting you attend who you think might be suitable for the ANZSN ASM, please forward their name(s) to me or another member of SPEC. We will continue to welcome ideas and constructive suggestions from members as to session topics or meeting format.

Educational Activities

As members will be aware, council for a number of reasons decided not to renew the contracts for the ANZSN Postgraduate Weekend. Hence the current educational activities under the jurisdiction of SPEC is the ANZSN update course. SPEC is currently working with ANZSN council on a new educational activity/meeting for advanced trainees. After seeking trainee input we hope to have a plan for the future in place by early 2016.

TJ Neale Award

Applications for this prestigious award will open next month and close at the end of March 2015. Recommendations for this award will be made to ANZSN council by an ad-hoc committee consisting of non-conflicted SPEC members, past winners of the TJ Neale award, and if required, after assessment of conflicts of interest, co-opted senior members of the society.

Final Word

I would like to thank those past and present members of SPEC who made my first year as chair such a pleasure, and I look forward to working with current and future members in the coming years.
A special thanks goes to Anna in the ANZSN office for helping coordinate SPEC activities and providing the invaluable support to the committee and myself as chair. It is most appreciated.

**A/Prof Angela Webster**
Chair, ANZSN Scientific Program and Education Committee.

**GIRESH TALAULIKAR – SPEC MEMBER**

**2015 ASM REPORT**

The recently concluded ASM of the ANZSN held at Canberra was attended by 450 registered delegates. The pre-meeting Update course had 154 attendees. The scientific programme set out by SPEC under the guidance of A/Prof Angela Webster was well received and rated to be of high standards by the attendees. I would like to place on record my sincere appreciation of the efforts put in by my colleagues Dr Krishna Karpe and Dr Richard Singer (as part of the local organizing committee) and by all staff members of Conference Design lead by Ms Anna Boyes.

The conference featured several interest group meetings and a new addition this year was a meeting by the Genetics Interest Group which was co-ordinated by Dr Andrew Mallet and Prof. Steven Alexander.

The event managers managed the conference (including the pre-setup arrangements) well with no unforeseen problems throughout the meeting. For the first time an event App, outlining events within the meeting including a narration of oral abstract by each session, was available. This will need further refining based on the feedback obtained from the survey.

The sponsorship monies raised during the conference through direct society sponsorship was higher due to an additional Diamond sponsor. This coupled with the higher delegate numbers allowed for reducing the registration fees back to levels charged in 2013. The higher income will leave the society with a higher level of disposable funds to use for research/education purposes in the future. There were challenges in securing funding from potential exhibitors which is an ongoing issue that Council is aware of. Attendance at the booths remains a concern for many exhibitors.

The social functions were well attended and the venues selected allowed to heighten the visibility of the society and its key members with the policy makers at a National level. The final dinner tickets were sold out with demands to accommodate more attendees that could not be met. An interesting administrative event of the meeting was the non-uptake of abstract books. Delegates were offered a choice of taking the printed abstract book and 80% declined. This is a high number and needs to be considered in future decision making in relation to publishing the books. There is a significant cost associated with this (approx. $15000) in addition to the environmental footprint as also the publication logistics often being the decider for closing abstract submission earlier.

A survey was sent out to all attendees and analysis of this will no doubt help further refine future meetings.

**Dr Girish Talaulikar**
Member of the SPEC committee

**DNT REPORT**

**FORMER CHAIR MATT JOSE**
**INTERIM CHAIR MARTIN GALLAGHER**

The major task of the DNT subcommittee is the organisation of the DNT workshop which was held in March 2015 in Launceston. This was a very successful 2 ½ day meeting that allows a highly interactive forum for discussion of many of the major issues confronting us in nephrology. Some of the highlights of the meeting this year included presentations on the obesity epidemic facing ANZ and our region, the mounting workforce challenges, along with updates on clinical trials activity, surgical developments and transplantation.

The feedback from attendees was very positive and also provided some ideas around how the meeting might develop into the future.

The DNT subcommittee is currently deliberating on a number of these issues which we will look at putting in place for the next meeting which is likely to be held in Adelaide in February 2017.
The DNT subcommittee sits at the intersection between a number of groups within the society and, as such, has an important role to play in coordinating many activities across all of these groups. I note from the report last year that Stephen May talked about developments in the terms of reference of the committee and this process has continued into 2015. The ANZSN Council has been looking at the role of all of the committees within the society and how they interact and report. This is likely to result in some changes to both nomenclature and function, but the DNT subcommittee are keen that it continues to be an important and vibrant means of guiding clinical policy in ANZ nephrology.

Important parts of this work in guiding clinical policy in the last 12 months of included the external review of KHA CARI by Catherine Marshall and Carol Pollock. This review was funded by DNT and interviewed a wide range of stakeholders across nephrology. Whilst generally positive about the guideline process and its centrality to ANZ nephrology, it’s also provided a useful guide to further developments in this space. Our thanks go to Catherine and Carol for a great job.

The DNT also remains focused on progressing a number of initiatives including the development of Key Performance Indicators for nephrology along with other ideas that has arisen out of the DNT workshop. We are keen to follow on the terrific work of Stephen May in aligning our activities with the views of the society membership as there are expressed at the DNT workshop. We look forward to working with the membership over coming months to progress these matters and facilitate the development of clinical services and policy.

Dr Martin Gallagher – Interim Chair of DNT
Prof Matt Jose – Former Chair of DNT
PAOLO FERRARI

2016 APCN REPORT

APCN 2016: A Message from the Convenor (October 2015)

There’s only ten months to the 2016 APCN in Perth (17-21 September) and we are well on track with the timeline set out by the Organising Committee and the co-chairs of the Scientific Program Committee (SPC), Masaomi Nangaku (for APSN) and Angela Webster (for ANZSN), who have designed a first-rate scientific program.

Scientific program

Two State-of-the-Art lectures will be given by Alvin Roth, Nobel Laureate 2012 (Game Theory in Transplantation) and Peter Doherty, Nobel laureate 1996 (T-cell receptor bias in immunity).

There will be 4 plenary lectures: these will include the Ross Bailey lecture given by Vivek Jha (Ethical dialysis), and lectures by Takashi Kadowaki (Adiponectin), Ravi Thadhani (Vitamin D receptor activation), Katherine Bristowe (Qualitative research in nephrology).

There will be 48 high-quality speakers for the 16 thematic seminars in the areas of “Aetiology & Pathogenesis”, “AKI/CKD”, “Dialysis” and “Transplantation”. Not including speakers who are also giving plenaries, seminars will be given by 19 distinguished colleagues from Australia and New Zealand and by 26 colleagues from the Asia-Pacific region, making this a truly international event.

Abstracts

The abstract submission web-portal has been designed following advice of the SPEC to include submission categories that reflect the type of abstracts submitted in past APCN and ANZSN meetings. The site is now open http://www.apcn2016.com.au/pages/abstracts.htm!#submit.

Promotion

The conference website (http://www.apcn2016.com.au/) has been recently updated. The preliminary program is regularly refreshed to reflect changes in the program. The link to abstract submission is now open and a mail-out to delegates was undertaken on the 14th October.

Sponsorship

Securing a strong support has been a very challenging task; most of the traditional ANZSN industry partners have committed to support APCN 2016, but engagement of regional industry partners has been more difficult. The exclusive Platinum sponsorship opportunity, 3 of the Gold sponsorship opportunities and a few minor sponsorship opportunities have already been taken up.

Budget and registration

We have worked on a tight budget with the aim of keeping registration fees as low as possible in order to be competitive with other international meetings. Early bird registration for the main meeting including the dinner will be $650 for ANZSN members, registration to the Nephrology Update Course will be $250. It has been agreed to include discounted registration for delegates from low-middle income countries (Afghanistan, Bangladesh, Cambodia, Myanmar and Nepal) as well as some of the Central & Western China Provinces.

The quality of the meeting and the beauty of Perth and Western Australia make it a meeting you don’t want to miss!

Warm regards,

Prof Paolo Ferrari – ANZSN President Elect
The RACP is working to develop selection criteria into basic physician training. The RACP encourages appointment of general medicine advanced trainees to some subspecialty training positions.

I would like to thank the hard working team that make up the ATC, and also outgoing member Nigel Toussaint and Chair Richard Phoon. The committee will continue to monitor changes in the training program and work with all parties to ensure well trained nephrologists into the future.

A/Prof Nicholas Gray
Chair, ATC in Nephrology

NICHOLAS GRAY
CHAIR – 2015 ATC REPORT
This year has been one of change for the committee – a new Chair, new terms of reference, and a new name! The Advanced Training Committee (ATC) has replaced the Specialist Advisory Committee (SAC) in Nephrology. The change has seen greater alignment between Australia and New Zealand, with the New Zealand Committee now a sub-committee of the ATC charged with managing local operational issues and the NZ Chair being a member of the ATC. The ATC reports to AMDEC.

Trainee numbers continue to grow and currently the ATC oversees 106 trainees in Australia (99 adult, 7 paediatric) and 23 in NZ. There are 4 overseas trained physicians completing peer review in 2015 and a total 24 overseas applications have been assessed since September 2012.

The size of the committee has reduced at the same time as trainee numbers increase. The ATC reviews all supervisor reports, prospectively approves and accredits training for each trainee annually, provides input to assessment of overseas trained physicians, monitors trainees in difficulty, and accredits training sites (47 in Australia, 11 in NZ, and 3 overseas). The workload for members has continued to grow and in response to this we sought expressions of interest from supervisors to mark trainee project submissions. We were pleased with such a positive response and hope to expand this in 2016.

The RACP has acknowledged the rapid growth in trainee numbers in recent years. There was an increase of 234% in adult basic physician trainees between 2001 and 2011 (585 to 1951) and advanced trainees (440 to 1469). In paediatrics, corresponding growth was 166% (199 to 530) and 335% (147 to 640). The RACP is concerned about the ability of hospitals to train the large number of junior doctors in the system and wants to ensure an acceptable standard is achieved for entry into the RACP training program.
The journal continues to gather strength. I’m pleased to report that the impact factor has continued its rise, with the 2014 figure reaching beyond 2.0 for the first time. Similarly, the journal ranking has improved.

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Amongst similarly ranked Nephrology journals, *Nephrology* has experienced the biggest rise in impact factor. It now ranks above Clinical Nephrology, Journal of Nephrology and BMC-Nephrology.

The top cited papers continue to be reviewed but not as dominantly as in the past. This speaks well for the quality of submitted research papers, as 7 of the top 10 quoted articles were submitted research papers. The CARI Guidelines continue to attract good levels of citations. Angela Webster’s Cochrane Commentaries have also been very well received and Angela’s contribution to this section is highly valued.

With the rise in impact factor, more articles are being submitted from outside the APSN region (e.g. Europe). Since the publication of the 2014 impact factor in June, the submission rate has increased markedly. In recent years we have received about 500-600 submissions per year – to date, we have received 630 for 2015, with a quarter of the year yet to go. This has put a significant load on the Subject Editors – as such I am slowly expanding the number of SEs on our panel.

The journal recognises and appreciates the ongoing support of the ANZSN. ANZ authors remain the predominant submitting group (35%) and are amongst the most highly cited. The journal continues to provide a significant publishing avenue for ANZ authors. The ANZSN is the only supporting Society to receive print copies for all members.

No decision about converting to online publishing only has been made. Although this has been talked about for some time, enthusiasm for this is mixed and the business model remains unclear. Nevertheless, it is apparent that this will eventually occur.

I encourage members of the ANZSN to continue to support the Journal – it has gathered strength and will continue to do so with your support. The Asian-Pacific region is the most rapidly growing Nephrology sector and we have an opportunity to grow the Journal into one of the pre-eminent Nephrology journals.

Prof Peter Kerr – Editor in Chief of the Nephrology Journal
The Australian and New Zealand Special Interest Group in Interventional Nephrology’s aim is the promotion and safe application of interventional procedures to improve the care and outcomes of patients with kidney disease.

**Aims:** Provide leadership and promote education and research in interventional nephrology through our objectives, which include: development of and coordinating training programmes, ongoing education, developing clinical outcome monitoring programmes and accreditation standards. We will promote Nephrology and Interventional nephrology in particular as a career choice.

**Activities for the 2015 year**
The ANZSIN annual satellite meeting, including workshop remains our main emphasis. Held as a satellite to and following the main ANZSN ASM of 2015 in Canberra, our meeting was on Thursday 10 and Friday 11 September 2015. This year’s meeting was a fantastic success with a record number of 79 registrants. This year was our second year of dialysis access nurses and technical staff as attendees. We are now geared to ensure the information presented is relevant to all personnel involved in interventional nephrology (including nurses, trainees and established nephrologists).

Both days are full-on, activities giving both the novice and experienced nephrology persons alike plenty of opportunity to initially experience or expand their established skills.

This year’s meeting had a strong overseas input on the haemodialysis theme – particularly vascular access issues. We had two excellent international speakers: Prof Roy-Chaudhury from USA who was also a speaker at the 2015 ANZSN ASM and Dr Takashi Sato from Japan. Dr Roy-Chaudhury spoke to us on novel therapies for vascular access and in a separate presentation topic issues with maturation of haemodialysis fistulae. Dr Sato presented the Japanese experience (and success they certainly have) in the use of plastic cannulae for haemodialysis access cannulation and his second presentation on the Japanese nephrologists’ involvement in the endovascular techniques for management of HD access.
The workshop was similar in content as last year with the addition of two enhancements. We had EVE (an arm model for endovascular intervention technique practice) at the angioplasty station; and we added demonstration of bone biopsy that can be part of the interventional nephrologists’ armamentarium. Each registrant had the opportunity to practice and undergo a hands on approach at each station At the ANZSN we also had a display in the exhibition hall, supported by ANZSN for which we are very grateful. The opportunity to set up a stand with interventional equipment and our computer large screen display of some interventional procedures assists us in raising our profile within the ANZSN community. We do hope to be able to continue this booth display at future ANZSN ASMs.

Affiliations:
As interventional nephrology is multidisciplinary, we continued our close relationship with affiliate membership to ANZRANN (ANZ Renal Access Nursing Network) with nursing involvement in our meeting. We have considered in the past year to extending our affiliation to vascular access surgeons, as we would benefit much from their input.

We also continue our close relationship through with ASDIN (our American equivalent) and most years several of our members attend the ASDIN, or we benefit from their contribution as a guest / visiting speaker at our meeting. Dr Richard Baer (our immediate past-chairman) and I were both invited to the inaugural Dialysis Access Symposium, Seoul, Korea held from 12-14 August 2015 to present on the status of interventional nephrology in ANZ, and lecture on some of the technical and procedural skills required in PD and HD. This was important as it raised the profile of Australia and New Zealand interventional nephrology. Our present Asia Pacific relationship in nephrology we anticipate will flourish into interventional nephrology also. Both our countries were looked upon by the Asian countries in attendance (over nearly 290 registrants) as a reputable knowledge source. We hope to stimulate more widespread interest in interventional nephrology at the combined ANZSN ASM and APCN in Perth, 17 - 21 September 2016.

Interventional nephrology remains a developing field and there is much to be learnt from international communication and participation in such fora.

Training and recognition:
We have continued discussion with ANZSN Council, RACP and SAC (renal) for formal recognition of our interventional skills and training programme. ANZSIN undertake to assist the individual’s knowledge base and direct them to resources so the interventional nephrologist can seek accreditation in their respective institution to practice their area(s) of interventional nephrology for the benefit of the local renal patient group. We have an interventional activity database in its infancy. This database will work as a logbook of events for the recording of and benefit to credentialing of interventional nephrologists and trainees.
In liaison with the NZ Peritoneal Dialysis Registry we have continued to develop a relationship that will assist in the PD catheter interventional logbook file and in particular outcomes for audit. In line with CARI group ANZSN has developed a renal biopsy CARI guideline – presently in draft format. We do hope that we can publicise this within the forthcoming year.

ANZSN webpage on the ANSZN website is awaiting complete development so we can host on to the ANZSN website and raise our profile with local ANZSN and wider interventional and general nephrology communities. This is also the medium where for our annual meeting presentations are publicised after the meeting.

Dr David Voss ED, FRACP, Chair of ANZSIN Special Interest Group

DAVID HARRIS - PRESIDENT-ELECT ISN PRESIDENT APSN, ISN AND APSN 2015 REPORT.

ANZSN’s recent re-examination of its Vision and Mission statements and the leadership positions in regional and international nephrology occupied by a number of Australians and New Zealanders, make it timely for ANZSN members to consider how they would like to be involved and for ANZSN to re-examine, strengthen and formalise its role in regional and global nephrology.

ISN UPDATE

- ISN continues to evolve its governance and mode of operation, with a much greater emphasis on regional implementation and leadership from its ten Regional Boards. There are 3 Regional Boards in Asia – North & East Asia, South Asia and OSEA, the latter currently chaired by Peter Kerr. The OSEA Regional Board is an appropriate conduit for ANZSN members and ANZSN itself to increase their involvement in global nephrology.

- Over the next several years ISN will focus on several major initiatives. The first is the 0by25 AKI initiative in emerging countries, which I am sure you have heard about. ISN will also be focussing on CKD, and on equitable and ethical access to renal replacement therapy, in particular dialysis. Given the increasing role of individual ANZ nephrologists in important CKD initiatives, ANZ should play a leading role in a global strategy for CKD and RRT. One of the first steps will be development of a global inventory of national CKD and RRT programs and resources.

- The Dialysis Prize (for design of an inexpensive HD machine suitable for use in emerging countries) has brought substantial interest, and already some promising plans. Applications close at the end of the year. This was conceived by John Knight from The George Institute and is funded by ISN, APSN and TGI.

- From January 2016 Kidney International will have a new publisher (Elsevier) and ISN will launch a new sister on-line open access journal, KI Reports. There will be some modest changes to KI itself, to address the loss of Nature Reviews Nephrology (NRN, see next paragraph). KI Supplements has achieved an impact factor of >10, making it the highest ranked nephrology journal.

- With a change in publisher and an unsustainable increase in its cost to ISN, NRN will no longer be available free to ISN members, but will be available as a low-cost optional membership benefit. This should have minimum impact in ANZ where the majority of members have institutional access to NRN. Seminars in Nephrology will also be available optionally at low-cost to members.
ISN is developing a new strategy for its global education activities, with plans to progressively develop a nephrology curriculum and to better align the various educational resources available from its meetings, publications and education website (ISN Education). There will be a special focus around ISN’s various initiatives (currently AKI, CKD, RRT).

An increasing number of ANZ nephrologists are occupying leadership positions within ISN. David Johnson and Rob Walker are on ISN Council; Peter Kerr will be taking over as head of ISN’s Sister Renal Program; Carol Pollock has just become the inaugural chair of ISN Meetings (a strategy to better align ISN’s various meetings including WCN, Nexus and Forefronts); Vlado Perkovic leads ISN’s Advisory Committee for Clinical Trials and Studies (ACCTS); Robyn Langham and David Harris are on the Executive.

APSN

The next Asian Pacific Congress of Nephrology (APCN) will be held in September 2016 in conjunction with ANZSN’s Annual Scientific Meeting.

An outstanding program has been developed. Many of the speakers (including two Nobel Laureates) have already confirmed. Special thanks are due to Paolo Ferrari, Angela Webster, Sharon Ricardo, and other members of the Scientific Program Committee and local organising committee. APSN is planning a substantial registration subsidy for nephrologists from low and low-middle income Asian Pacific countries.

APSN’s CME program is expanding with several successful meetings this year, including in Japan, Thailand and in November in China. The CME Committee is led by Masaomi Nangaku and Matthew Jose plays an important role.

The APSN website is being reformatted at present to make it more relevant and more valuable to APSN members. PDF’s of presentations from various CME meetings are available on the website. More interactive formats are planned for the future.

Nephrology has achieved an impact factor of >2 giving it a ranking of 15 amongst 36 nephrology journals world-wide. This is an important milestone for the journal. Special thanks are due to Peter Kerr and all the ANZSN members involved in the editorial team, or as reviewers and authors. The journal is available to all ANZSN members, but surprisingly many other members of APSN don’t appear to have easy access to the journal. This will be addressed soon.

APSN has renewed its partnership with ISN to co-fund applications for global outreach activities occurring in our region, including Fellowships, Sister Renal Centres, Educational Ambassador, Clinical Research and CME. ANZSN provides useful top-ups to ISN and ISN-APSN fellowships hosted in Australia. Regional and global nephrology would benefit from the involvement of more ANZSN members and of ANZSN itself in the activities of ISN and APSN.

Prof David Harris
President-elect ISN
President APSN

Kidney Health Australia programs and services are focused on our four strategic pillars of education, advocacy, research and support

Education

The Kidney Health Australia clinical education program that started over 13 years ago remains the principal voice for kidney disease education in primary care. “CKD Management in General Practice”, launched an Apple and Android app to support the hard copy book, educated over 4,000 primary care health professionals and provided 5,000 hours of education.
These metrics have more than doubled in the past five years. This program continues to benefit from the support of nephrologists and renal nurses who volunteer their time and expertise, and we would like to thank everyone who has contributed to these outcomes.

If you would like to participate in clinical education by providing your local primary care health professionals (GPs, pharmacists, practice nurses) with CKD education we can help by providing teaching materials that cover the spectrum of CKD. Please contact the KCAT team at KCAT@kidney.org.au for more information.

A flagship consumer education program that will be launched in 2016 is the ‘My Kidneys, My Health’ education package for people living with early stage CKD. A free hard copy handbook is currently in press, and will be available for distribution in early 2016. This will be supported by online resources and a smartphone app. Providing essential information to assist people with CKD to manage their health and slow or prevent the progression of their kidney disease, these resources address a significant gap in consumer education. More information about ‘My Kidneys, My Health’ will be available next year, but in the interim please direct any queries to debbie.fortnum@kidney.org.au.

Advocacy

The number of issues profiled and translated into government health policy has steadily grown in 2015 with key result areas including the first ever national live organ donor paid leave scheme which provides nine weeks of federally funded paid leave, approximately $30 million in additional travel funding from State Governments in NSW, Victoria, the Northern Territory and South Australia, and a National Leadership forum in Parliament House into renal disease in Aboriginal and Torres Strait Islander Communities contributing to a recent investment of $25.3 million for extra services. Please contact luke.toy@kidney.org.au for more information on state and federal advocacy issues.

There is a continuing need for consumers in the kidney world to represent the kidney sector on groups and committees if you have any likely candidates who would be able to articulate the consumer view around committees focussing on guidelines (CARI), education (KCAT) or information (ANZDATA) please contact anne.revell@kidney.org.au.

Research

In 2015 the Priscilla Kincaid-Smith Kidney Research Foundation was launched and has allocated and disbursed $496,000 to support four clinical investigator led research projects, five PhD scholarships, six Masters Scholarships, and project funding for ANZDATA, the AKTN and the STELLAR project.

In addition, researchers at the University of Sydney are currently working with Kidney Health Australia to help obtain the views of the kidney community as to what the PKSKRF future funding priorities should be. A three-round Delphi survey was commenced in October, with the final data expected in January 2016. For more information on the PKSKRF please contact david.zerman@pkskrf.org.au.

Support

Programs that support the emotional health and well-being of people with kidney disease remain a core focus of Kidney Health Australia activities.

The Victorian Big Red Kidney Bus has been recognised at the state and national level as an innovative model of providing holiday dialysis. The project won both the National Disability Award for Excellence in Community Accessibility, and the Victorian Government Healthcare Award for the Most Innovative Model of Care. There are definitive plans to expand the Big Red Bus concept to Western Australia and New South Wales in 2016. For more information contact jo.fairbairn@kidney.org.au.

In October the first Emorgo Transplant House (located in Brunswick, Melbourne) celebrated its first birthday. Notification has been received from the Emorgo Foundation that they will be funding a second Emorgo Transplant House.
For information on the website or regarding upcoming social media activities and opportunities, please contact cassandra.bradshaw@kidney.org.au

Dr Marie Ludlow (PhD)
General Manager Health Outcomes and Evaluation
Kidney Health Australia

Kidney Community News

Kidney Health Australia produces a bi-monthly free newsletter for the kidney sector. Covering a range of topics of interest to patients and health professionals, this newsletter is a great way to keep up-to-date with Kidney Health Australia’s programs and services, and the impact they are having. Visit kidney.org.au to register and join the Kidney Community mailing list.

Kidney Health Australia also recently launched a new look website at kidney.org.au, which features a Health Professionals Hub with quick links to our most popular tools and resources for clinicians. The new site is intuitive to navigate, and provides new information on general kidney health issues, such as kidney stones and acute kidney injury.

In the digital space, it has also been a big year for Kidney Health Australia in social media with strong growth across Facebook and Twitter, and the introduction of an Instagram account. Kidney Health Australia’s Facebook engagement rates (the frequency and quality of audience interaction with our content) continue to sit at above average levels for the sector.

You can connect with Kidney Health Australia’s social media channels here:

Facebook: KidneyHealthAust
Twitter: @KidneyHealth
Instagram: @kidneyhealth
YouTube: KidneyHealthAus
provided valuable insights into current practice and its measurement. This project has now finished with the analysis of the main outcome data currently in progress and further papers will be written over the next 6 months. We have sought to leverage this investment in quality improvement with applications for peer-reviewed funding over recent years. While that has not been successful to this point, we are optimistic that at some point “the dam will break” and monies will flow into this essential aspect of clinical practice development.

As ever, the guidelines space remains a challenge. We continue to develop our work plans for future years and do so in concert with other guideline groups internationally, to minimise the duplication. The largest international guidelines group, KDIGO, also realises the challenge of guideline development. No one group can cover the entire spectrum of renal clinical practice guidelines, so sharing that responsibility across the international groups is inevitable. We remain committed to working out how best to do this, while not losing the important contribution of enthusiastic and informed local nephrologists.

I’d also like to thank the fantastic work done by the KHA CARI office based at Westmead, especially Denise Campbell, Pamela Lopez-Vargas, David Tunnicliffe, Martin Howell and Allison Tong. I would also like to thank the KHA CARI Steering Committee who have been a steady hand in what has been a challenging year.

A/Prof Martin Gallagher
CARI Chair

The Australasian Kidney Trials Network (AKTN)

CLINICAL RESEARCH IN KIDNEY CARE

The AKTN continues to have a very busy and productive agenda including finalising reports and manuscripts for AKTN trials recently completed, the development of new trials, fostering collaboration with international partners, and submission of new funding applications. The AKTN is currently conducting three randomised controlled trials (PEXIVAS, IMPROVE-CKD, CKD-FIX) and one observational study (PDOPPS) at renal units in Australia and New Zealand. In the coming months Mexican collaborators will commence recruitment for the CKD-FIX study, and Malaysian collaborators for IMPROVE-CKD.

NHMRC PROGRAM GRANT

Recently a National Health and Medical Research Council Program Grant was secured. The Program Grant is a collaboration of Chief Investigators Jonathan Craig, David Johnson, Jeremy Chapman, Carmel Hawley and Stephen McDonald and brings together the AKTN, CARI, Renal Cochrane Group and the ANZData registries. Commencing in 2016 this funding will allow the AKTN to enhance current research capabilities, build a stronger clinical research workforce via increased educational opportunities for early and mid-career researchers, and foster innovation through pilot funding of new research ideas.

The FAVOURED Trial Results

The FAVOURED Trial is a factorial trial designed to evaluate the effects of aspirin and fish oil (omega 3 fatty acids) in the prevention of early thrombosis in arteriovenous fistulae in patients requiring haemodialysis.
The trial was an international collaboration bringing together researchers from Malaysia, the United Kingdom and New Zealand. Recruitment was completed in February 2014 with a worldwide total of 568 participants. The main study manuscript is being prepared and the results will be presented by Chief Investigator Ashley Irish in the Late-Breaking Clinical Trials Session during the ASN Kidney Week in San Diego on Saturday November 7th 2015 at 12:15pm.

THE BLOCADE TRIAL RESULTS

The BLOCADE Trial is a feasibility study testing the viability of recruitment and the safety and tolerability of the beta blocker Carvedilol in dialysis patients. The trial completed recruitment in 2013, and the main results paper is being finalised for publication before the end of this year. Notification of publication and dissemination of the trial results will occur once the publication process has been completed.

AKTN WORKING GROUPS

Through the Scientific Committee the AKTN has formed 6 working groups whose remit is to support the research agenda of the Network within selected sub-specialties of kidney disease research and research methodologies. The specific aim of the working groups is to increase the number of trials generated by the AKTN, and ensure all trials coordinated, facilitated or promoted by the AKTN are founded on good quality evidence, are well designed, and have substantial scientific and clinical significance to the kidney care community. Each group comprises 2-4 members of the Scientific Committee as well as additional members from the research community including nephrologists, physicians from other disciplines, GPs, nurses, epidemiologists and allied health workers.

From time to time, the AKTN calls for expressions of interest for membership to the individual groups. This is done via the ANZSN, however if you would like to be contacted directly when a membership opportunity arises please contact Donna Reidlinger (aktn@uq.edu.au).

Haemodialysis: Chair: Meg Jardine Members: Matthew Roberts, Fabian Marsden, Carmel Halwy, Kevan Polkinghorne, Nicholas Gray, Samantha Hand, Amanda Mather and Colin Hutchison

Peritoneal Dialysis: Chair: Matthew Jose Members: Josephine Chow, Rob MacGinley, Louis Huang, Jo-Anne Moodie, Jeff Wong, David Johnson, Neil Boudville, Yeourgjee Cho, Carmel Hawley

Transplantation: Chair: Wai Lim Members: John Kanellis, Steve McTaggart, Shlomo Cohnrey, Neil Boudville, Michael Collins, Rob Carroll, Allison Tong, Katherine Barraclough, Ross Francis, Aron Chakera, Germaine Wong, Phil Clayton, Kathy Kable

CKD/GN: Chair: Nigel Toussaint Members: Chen Au Peh, Katrina Campbell, Vlado Perkovic, Jean Tan, Lisa Jeffs, Alan Parnham, Chris Hood, Giles Walters, Suet-Wan Choy, Sunil Badve, Joshua Kausman, Bhadran Bose


Methodology: Chair: Elaine Pascoe Members: Phil Clayton, Suetonia Palmer, Jonathan Craig, Magid Fahim

The Australian Clinical Trials Alliance (ACTA)

ACTA’s mission is to promote a high quality and cost effective health care system through the generation of evidence via investigator-initiated clinical trials and clinical quality registries. The development of ACTA has been strongly supported by the AKTN’s Executive Operations Secretariat, with Alan Cass and Carmel Hawley both inaugural members of the ACTA Board. Vlado Perkovic was elected to the board in October. ACTA recently hosted an International Clinical Trials Symposium in Sydney with the theme Better Health, Better Evidence. The program featured renowned international keynote speakers including Professor Tim Walley from the UK’s National Institute for Health Research and Professor Richard Horton, Editor-in-Chief of the Lancet.
Carmel, Alan and Vlado were invited speakers at the meeting and also chaired several sessions across the Symposium’s four days.

STAYING UP TO DATE WITH AKTN RESEARCH AND EVENTS

Twitter: Follow the AKTN to receive individual trial recruitment updates, current research news and educational events - @kidney_trials

Website: The AKTN website is currently being updated. Future capabilities will include training webinars and individual trial portals to house study specific resources and documents – aktn.org.au

Contacts
Business Development Manager (Clinical Research), Donna Reidlinger: aktn@uq.edu.au
Chair, Operations Secretariat, Carmel Hawley: carmel_hawley@health.qld.gov.au
Chair, Scientific Committee, Neil Boudville: neil.boudville@uwa.edu.au
A/Prof Carmel Hawley
Chair, AKTN Operations Secretariat

This year marked the third and final year of the current executive, and the society is indebted to the hard work and excellent leadership of the immediate past chair, Fiona Mackie, her predecessor Steve McTaggart and secretary, Sean Kennedy. It was an honour to be elected as the current chair with the support of my fellow executive members, Fiona Mackie, Deirdre Hahn and Tonya Kara.

In 2013 a subcommittee was formed to promote collaborative paediatric research in Australia and New Zealand, chaired by Peter Trnka. The group has contributed expertise in the development of a national study of paediatric/ young adult dialysis outcomes (ANZADS) (lead investigator Anna Francis) and the multi-centre aDOPT trial investigating the role of mycophenolate therapeutic monitoring is successfully recruiting patients (lead investigator David Metz). Another group, chaired by the IPNA representative (currently Debbie Lewis) continues to promote the delivery of paediatric renal care (AKI management) and education to the Oceania. Significant progress has been made in delivering a local programme that provides acute peritoneal dialysis to children with reversible AKI in the Oceania. Congratulations to Debbie and the Oceania group for achieving some key goals including secured funding, access to equipment, engagement with stake-holders and now the development of an educational package for local health care workers underway. Amelia Le page is providing a strong profile for young nephrologists in Australia and New Zealand as the junior IPNA representative.

Anne Durkan is the ANZPNA representative on the SAC Nephrology. We are pleased that there has been approval granted for adult trainees undertaking training in paediatrics.

With restructuring of the college and the establishment of the College Council and incorporating representatives from all 25 education pathways, there has been an opportunity for ANZSN
and ANZPNA to collaborate closely, sharing this position between the societies will be Anne Durkan and Germaine Wong.

Lastly, the new vision for the ANZSN was warmly received by ANZPNA. The two societies enjoy strong ties and ANZPNA looks forward to playing a role in the evolution of ANZSN and how its new vision can serve our mutual goals.

Dr Joshua Kausman
Chair, ANZPNA

The Australian and New Zealand Dialysis and Transplant Registry (ANZDATA) continues to collate, analyse and report on the use of renal replacement therapy (dialysis and kidney transplantation) for the >21,000 Australians and >4,000 New Zealanders with end-stage kidney disease.

The recent 51st Annual Scientific Meeting of the ANZSN was held in Canberra with the ANZDATA session held on the Tuesday morning with presentations from:

- Matthew Jose: Overview of ANZDATA
- Kevan Polkinghorne: Dialysis modality and survival
- Namrata Khanal: Indigenous transplantation
- Wai Lim: Accuracy and Utility of ANZDATA Registry in kidney transplantation
- Stephen McDonald: Mythbusters

In addition, data from ANZDATA was used in over 20 presentations during the actual meeting.

Data returns for the year 2014 are near complete with data-lock planned for coming days (November). With ever-increasing number of people on renal replacement therapy, this year there were over 30% of units returning their data within 3 months and 93% by 6 months. After data-lock, we anticipate Individual Hospital reports will be distributed in December with an Australian and New Zealand Interim Summary of data about the same time.
In 2013-14 the Registry’s database and online application underwent development on major scale and this tool is nearing its completion, with implementation commencing late 2015. This implementation will also enable electronic data transfer from renal units IT systems to the Registry, to improve on the above mention timelines.

Data requests continue to increase year-on-year ranging from single unit information to large data linkage projects.

![Figure 1: Total Requests by Source: 2015 year to date](http://www.anzdata.org.au/v1/hospitalreport.html)

In 2015, abridged versions of the identified hospital reports were available publically on the website for the first time (at http://www.anzdata.org.au/v1/hospitalreport.html). This is supported by Heads of Renal Units and will continue to be developed and updated.

Quarterly KPI reports for (i) vascular access and (ii) peritonitis continue to be reported and available on the secure web depot.

Another outcome of the Heads of Unit meeting earlier this year was the proposal that the projects for which ANZDATA supplies data be listed publicly. The data request form has been modified to include a short “lay summary” which would be placed on the website. This would allow greater transparency over the utilization of ANZDATA data.

### Table 1: Number of 2014 Surveys Returned by State & Month

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% State Returned

- QLD: 100%
- NSW: 100%
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- VIC: 100%
- TAS: 100%
- SA: 100%
- WA: 100%
- NT: 100%
- NZ: 100%
- Total: 100%
The Amgen Epidemiology Fellow in 2015 was Dr Namrata Khanal. This fellowship position has been proudly supported by AMGEN Australia for a number of years.

I would like to acknowledge the convenors of the ANZDATA Working groups who provide expertise and direction in their portfolios, specifically Germaine Wong (Cancer), Suetonia Palmer & Jaqui Hughes (Indigenous), Sean Kennedy (Paediatric), Kevan Polkinghorne (HD), Neil Boudville (PD), & Wai Lim (Transplant). A number of vacancies arise within the working groups each year and these will be advertised through ANZSN weekly email.

ANZDATA gratefully receives in-kind support from all renal units in Australia and New Zealand and funding from the Australian Organ Donation and Transplantation Authority (AOTA), New Zealand Ministry of Health Kidney Health Australia (KHA) and the Australian and New Zealand Society of Nephrology (ANZSN).

Prof Matthew Jose
Chairperson, ANZDATA Steering Committee

This year we also trialled a trainee dinner in Sydney on tips for surviving nephrology training and career planning – this was well received, with career planning a major topic of interest for all trainees.

The ball is rolling on the Kidney School website and is now ready to be used as a forum to post educational material.

We continue to strive to improve the reach of Kidney School and would appreciate departments encouraging trainees to attend. Those that participate currently provide positive feedback on Kidney School’s role in trainee education. We are also keen to hear feedback about the Kidney School format and access, so please drop us a line if you have suggestions!

If you would like to hear more about Kidney School events, please sign-up to our mailing list via this link: http://eepurl.com/usXRn. We are only able to contact trainees that subscribe to our mailing-list, so please share and join!

Amani Mallawaarachchi
Kidney School Director

Kidney School continues to run monthly education sessions for Nephrology trainees. The interactive webcast sessions are attended by trainees across the country (from Alice Springs to Melbourne!), nurse practitioners and nephrologists from Vietnam and Fiji. The live webcast format allows people to attend in-person if possible, and also provides education for those at distant locations. Popular topics in 2015 have included ‘Renal Pathology’, ‘Nuclear Medicine and Nephrology’ and ‘Interventional Nephrology’.
ANZSN Annual Bulletin December 2015

ANZSN Environmental Sustainability Working Group

In 2016, the ANZSN will be convening a Working Group to address the issue of environmental sustainability within Nephrology practice in Australia and New Zealand.

Nephrology practice, particularly dialysis, is one of the most energy and resource intensive treatments in current day medicine. The environmental price of this is high and unlikely to be acceptable to regulatory bodies and the broader community in the longer term, particularly at a time when global efforts to reduce carbon usage and combat climate change are intensifying. The financial price paid is also high, with management of end-stage kidney disease estimated to cost the Australian Government $12 billion over the period 2009 to 2020 (1).

International experience has demonstrated reduced resource usage and costs from environmental initiatives in kidney care (2-4). Broader benefits have also been reported, including improved efficiency, a common sense of purpose and higher patient and staff morale within renal services.

The formation of a group of individuals with expertise and/or interest in this area, mandated to focus specifically on environmental sustainability within Australian and New Zealand Nephrology practice, would drive much needed change in this area.

Proposed functions of the group include:

- To provide a forum for the sharing of ideas and collaboration.
- To create a Position Statement to reflect the ANZSN’s stance on this issue.
- To consider and promote research initiatives which explore environmentally sustainable practice.
- To consider means of incorporating relevant environmental themes into Australian Nephrology scientific meetings and the Nephrology training program.
- To work with key partners (e.g. KHA) to engage healthcare professionals, patients and the wider community in understanding the connections between Nephrology care and the environment.

Expressions of interest will be sought over the next few months. Interested individuals are encouraged to apply.

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SPECIAL ACHIEVEMENTS

Adrian Buttimore, a past member of the Society was made an Officer of the New Zealand Order of Merit (ONZM) at the New Year for his service to health. Adrian made key contributions to the care of New Zealanders with kidney failure during a career spanning over 40 years. A passionate and skilled advocate for home dialysis, he was the Dialysis Services Manager at Christchurch Hospital from 1969 to 2012. He steered the founding of the NZ Board of Dialysis Practice which has resulted in the establishment of standards of practice, career path development and professional certification for dialysis technicians in New Zealand. He was a founding member of the Renal Society New Zealand Branch and was made an Honorary Life Member of the RSA in 2011. Adrian has been a long term member of the local patient support group, The Christchurch Kidney Society and in recognition of his extraordinary support for, and rapport with, patients and their families, was elected an Honorary Life Member in 2011.

PRISCILLA-KINCAID SMITH MEDAL 2015

Emeritus Professor Priscilla Kincaid-Smith AC, BCE, who passed away in July this year at the age of 88, left a lasting legacy. Professor Kincaid-Smith discovered the link between commonly prescribed over-the-counter pain killers containing phenacetin (such as Bex and Vincent’s) and changes in kidney structures and function. Banning of these medications not only dramatically reduced the incidence of kidney failure due to analgesic nephropathy, but also contributed to a decline in renal pelvis cancer.

In 1994, in honour of Professor Kincaid-Smith, Kidney Health Australia (then known as the Australian Kidney Foundation) established the Kincaid-Smith Medal. This prestigious award is Kidney Health Australia’s highest scientific accolade to an Australian citizen or resident for outstanding clinical and scientific achievement in treatment of kidney disease and urinary tract. Despite being in existence for twenty years, the Priscilla Kincaid-Smith medal had only been awarded seven times. However, this year for the first time, there were two worthy recipients of the medal. At a dinner at the Australian and New Zealand Society of Nephrology (ANZSN) Annual Scientific Meeting at Parliament House in September, the Priscilla Kincaid-Smith medal was awarded to Professor John Agar OAM and Associate Professor Tim Mathew AM.
Professor Agar is known as a trail-blazer in his drive to support home-based and nocturnal dialysis, and his pioneering work in Australia with nocturnal dialysis has led to improved health outcomes for patients on extended hour dialysis. Associate Professor Mathew is a former Kidney Health Australia Medical Director who has worked tirelessly to positively impact the lives of Australians affected by kidney disease, whilst pursuing research into immune suppression in transplants, progressive renal failure, and the effects of drugs on the kidney.

In a video message, then Prime Minister the Hon. Tony Abbott MP congratulated the recipients on their substantial contribution to the field of nephrology, which has helped to improve the lives of all those facing kidney diseases. At the Parliament House dinner, Kidney Health Australia CEO Anne Wilson also announced the Australian Kidney Research Foundation would be known as the Priscilla Kincaid-Smith Kidney Research Foundation, in honour of Professor Kincaid-Smith.

Dr Marie Ludlow (PhD)
General Manager Health Outcomes and Evaluation
Kidney Health Australia

**Pricilla-Kincaid Smith Medal 2015**
International Speakers

Left: Professor Alan Cass ANZSN Chair and Keynote Speaker Professor John Gill
Centre: Professor Alan Cass ANZSN Chair and Keynote Speaker Professor Bruce Molitoris
Right: Professor Alan Cass ANZSN Chair and Keynote Speaker Professor Prabir Roy-Chaudhury

The Best Rural Science award presented by Prof Roy-Chaudhury to Shyam Dheda

Above: KHA CEO – Anne Wilson presents The KHA Clinical Science Award to Germaine Wong

The Shaun Summers Clinical Trainee Award presented by Prof Alan Cass ANZSN President to Samantha Chan
The Young Investigators Award Basic Science awarded to Jonathan Dick (not present) from left to right: Dr Kym Bannister (Amgen Rep), Simon Jiang, Xiaochen Chen Andrea Godfrey, Prof Alan Cass ANZSN President.

The Young Investigators Award Clinical Science awarded to Huang Do Nguyen (not present) from left to right: Dr Kym Bannister Amgen Rep Kassia Beetham, Anouskha Krishnan Karen Waller, and Prof Alan Cass ANZSN President.

The KHA Clinical Science Award Runner ups from left to right: Stacey Hokke, Anne Wilson CEO KHA, Melanie Wyld, Wai Lim, Kevan Polkinghorne and Prof Alan Cass ANZSN President.

The ANZSN YIA Best Basic Science Award presented by (left) Dr Kym Bannister (Amgen Rep) and (far right) Prof Alan Cass ANZSN President to Dr Stephen Holdsworth on behalf of Jonathan Dick.

The TJ Neale Award presented by Prof Alan Cass ANZSN President to Stephen McDonald.
ANZSN Travel Grant Reports

2014 ANZSN Travel Grant Report
ERA-EDTA Amsterdam
Sradha Kotwal

I would like to sincerely thank the Australian and New Zealand Society of Nephrology for awarding me a travel grant to present my poster at the *International Congress of the International Society for Haemodialysis 2015* in Kuala Lumpur.

The meeting was well organized to accommodate over a thousand delegates. Distinguished lectures were given by leading experts in the field of haemodialysis. Among the many excellent lectures highlights included a debate entitled ‘Which one is better? Short term daily haemodialysis or long-term nocturnal haemodialysis’ presented by Professor Michael Rocco and Professor Robert Pauly, which provided a critical and comprehensive review of the current literature. I also enjoyed the inspiring and thought provoking presentation on ‘green dialyses by Professor John Agar that highlighted the substantial water and power consumption of haemodialysis and ways to reduce water and energy wastage. I also gathered new knowledge on managing vascular access complications, on iron-based non-calcium containing phosphate binders and on challenges and benefits of home haemodialysis. My poster presentation on the baseline characteristics of the FAVOURED trial was well received and lead to productive discussions with research colleagues; amongst others Dr Hooi, Malaysian co-investigator of the FAVOURED trial (see photo attached).

Kuala Lumpur provided a fantastic and spectacular venue for the conference with magnificent views of the famous Petronas Twin Towers from the convention Centre. The conference opening ceremony as well as the Gala dinner showcased local customs and traditions, with traditional dance performances and Malaysian cuisine.

Overall it was an excellent experience listening to multiple world-class speakers and gathering crucial information for my future career. I would like to express my gratitude again to ANZSN for such a valuable opportunity.

2014 ASN- Kidney week, Philadelphia, United States of America.

Stacey Hokke

I would like to thank ANZSN for generously awarding me a travel grant to attend the ASN Kidney Week Annual Meeting in Philadelphia where I presented a poster titled “A ‘Western’ Diet Leading to Maternal Obesity and Glucose Intolerance Elevates Offspring Nephron Endowment without Adverse Effects on Adult Renal Function”.

The ASN Meeting was the first international nephrology conference I have attended. The range of presentations covered every aspect of nephrology and the sheer number of attendees was overwhelming. With over one thousand posters displayed per day, the exhibit hall was far beyond my expectations. I enjoyed learning new techniques to image the kidney and track cellular movements in kidney development, hearing the latest in paediatric and obstetric nephrology and discovering further the genetic control of kidney development. Attending sessions on kidney disease and poor kidney health in at-risk groups such as pre-term infants, diabetic youths and indigenous populations, and how the burden of kidney disease can be reduced, was particularly interesting to me. To be in the same room as prominent scientists and clinicians whose papers I have pored over, and to hear their passion and drive for their area of research was brilliant.

At my poster session I received very helpful feedback from nephrologists and basic experimental and clinical
scientists. Informal discussions with researchers about my data, the methods I employed and different perspectives on

The implications of my findings were highly valuable.

The ANZSN grant also enabled me to travel to New York City, where I visited the lab of Prof. Frank Costantini at Columbia University. I was fortunate to present my research and hear from Frank and his team about the elegant experimental work they conduct in order to understand the specifics of ureteric branching morphogenesis. I gained an insight into research in the US and had a truly enjoyable day discussing science with the lab.

Again, I wish to sincerely thank ANZSN for providing me financial support and the opportunity to attend ASN 2014.

Brooke Huuskes

I would like to thank the Australian and New Zealand Society of Nephrology for awarding me a travel grant to attend the ASN Kidney Week meeting in Philadelphia, USA, which gave me the opportunity to present data obtained during the first two years of my PhD titled: Attenuation of renal fibrosis through the combined therapy of mesenchymal stem cells and the hormone serelaxin.

This was my first international conference, with my poster session “Stem Cells and Regeneration” being on the first day. I was very excited to share my work with the scientific community and one of the first people who inquired about my work was someone who I reference and have read all their papers! On top of that, she said that I was doing fantastic work! It was such a buzz actually meeting people in the field and having discussions with them about my work. I was talking to people throughout my whole poster session, which was very rewarding.

The conference program was quite large and very impressive, and I found myself running from room to room to try and take everything in. I attended talks focusing on inflammation and fibrosis in renal disease, as well those that really drilled down into the mechanisms of injury and repair of the kidney. I learnt so much from these mini oral session, but perhaps the most impressive sessions I attended was by all the “big guns” in the field. I was so inspired by these talks. I was fortunate enough to see Dr Bonventre talk about the triggers of proximal tubule injury; Dr Humphreys explained how his experiments demonstrate that the regeneration of the proximal tubule comes from within the tubule itself; and Dr Zeisberg spoke about how the activation of myofibroblasts is perpetuated in the fibrotic kidney. I saw the results of some incredible research and it motivated me to continue doing my own. Again, thank you to the ANZSN for giving me this magnificent opportunity.

Jay C Jha

Baker IDI heart and Diabetes Institute, Melbourne, Australia

This was one of the best opportunities for me to attend and present my work to the annual meetings of American Society of Nephrology (ASN) 2014 kidney week, held in Philadelphia, PA, USA. My abstract was accepted for the oral presentation category. ASN is one of the leading scientific meetings in the field of chronic kidney disease, including diabetic nephropathy and the area of research I am involved in is diabetic kidney disease. It helped me to enhance my scientific knowledge and my confidence levels in presenting in front of well-known scientists in the area of kidney disease. This provided me the opportunity to meet and interact with some of the great scholars in this relevant area of research. This meeting helped me in networking and collaboration for future work. Overall, it was very successful trip and good international exposure in the field of kidney disease research.
Xianzhong Lau

I would like to sincerely thank the ANZSN for supporting my attendance at the ASN Kidney Week 2014 conference held in Philadelphia, where I also had the opportunity to present my research during one of the poster sessions.

This was the first ASN conference that I have attended and I was blown away by the scale of the conference and breadth of research presented. I also attended the early program “Advances in Research Conference – Building a Kidney”, which was aimed to explore concepts from embryology and innovations in tissue engineering that can be applied to kidney repair and regeneration. The 2-day program was comprehensive and thorough, covering both fundamental aspects of embryology and tissue engineering, and the most current research available in those fields. It was also interesting to listen to leading scientists from stem cell research and tissue engineering, in the nephrology field or researching on other organ systems, discussing their breakthroughs and challenges. It was concluded at the end of the program that bioengineering a kidney is still far in the future due to the complexity of the organ and the limitations in our understanding of how the kidney differentiates and organises itself during development. However, the program did lay out the current progress made and opened avenues that warrants investigation.

The main conference for 2014 was built around the theme “Building New Paths to Kidney Health”. The plenary lectures given by guest speakers reflected on that, where leading researchers touched on their discoveries, breakthroughs and innovations, to inspire the audience to apply new ways in understanding and tackling kidney diseases. One of the plenary lectures that I particularly enjoyed was “Stem Cells to Understand and Treat Diabetes” given by Prof. Douglas Melton. He presented his work on successfully differentiating beta cells from stem cells in quantities enough for cell transfer and pharmaceutical use, which has huge implications for the understanding type 1 diabetes and its treatment.

As there was a huge number of poster and oral sessions being presented at the conference, I decided to attend sessions that I was most interested in, namely those related to acute kidney injury, chronic kidney disease and renal fibrosis, which were related to my PhD. One of the presentations that stood out for me, was “Putting It All Together: Lessons Learned from Liver Fibrosis” by Prof. Scott Friedman, during the session “The Path to CKD: Fibrosis to Sclerosis”. He discussed the similarities between fibrosis of various tissues and the sources of fibro genic cells, which I found useful in my understanding of tissue fibrosis.

I was also given the opportunity to present my part of my PhD research during the poster session. Presenting my research to delegates at the conference allowed me to gain valuable insight on my research, in terms of comments and feedback on progressing with the study. Additionally, I was surprised by the amount of interest from pharmaceutical representatives on my findings.

Overall, the conference gave me an invaluable educational experience, which I thoroughly enjoyed, and a renewed sense of vigour for my research. Once again, I would like to thank the ANZSN for their financial support.

Andrew Mallett

“Clinical Diagnostic Testing Amongst Australians with genetic Renal Diseases using a Targeted Exosmic Approach”

The 2014 ASN Kidney Week in Philadelphia was a cohesive, cutting edge and inspiring conference for Nephrology and myself personally. I am thankful to the ASN for a travel grant enabling my attendance. The research that I presented reported on the local
experience utilizing a targeted exomic approach to secure genetic diagnosis for an Australian cohort of patients with inherited kidney diseases. This has now become the Australian Renal Gene Panels Project and the questions and feedback I received at ASN has been very helpful in continuing to progress this.

With regard to my interest area of inherited kidney disease, 2014 Kidney Week was remarkable for the breadth of new data and hypotheses presented. The renal genetics pre-conference course was high quality and very encompassing. Given the high pace at which new discovery is occurring in nephrogenetics, this course is rapidly becoming a “must do” within the field.

The HALT-PKD trial was reported upon and has now been followed with publication in the New England Journal of Medicine. Whilst a negative study, it provided informative insights. Firstly, ACEi therapy was safe in those with early and late stage ADPKD. Further there was no evidence of benefit from dual ARB-ACEi therapy in ADPKD. Lastly the finding of some benefit in slowing total kidney volume expansion amongst those with early stage ADPKD by targeting a lower blood pressure target is interesting. Together these findings will enable further future study into the treatment of ADPKD, the most common potentially lethal inherited monogenic disease in humans.

Further fascinating findings reported included:

- pre-clinical studies of miRNA therapies for Alport Syndrome
- the significant finding of an association between COL4A3/4/5 mutations and FSGS in Adults, further broadening genotype-phenotype correlations
- generation of patient-derived induced pluripotent stem cell for several inherited kidney diseases, including redifferentiation to tubular phenotypes
- the discovery of new genetic causes for NPHP/NPHP-RP
- description of application of genetic sequencing technologies in the NIH Undiagnosed Diseases

program and other rare disease investigation programs

Of great interest this year was the ASN President’s speech given by Dr Sharon Moe. Rarely does such a plenary do so much to confront a plethora of issues facing nephrologists, renal patients, and renal researchers (basic science and clinical science alike) and provide inspiration for a way forward. This speech was perhaps a turning point for our specialty. I am thankful to the ANZSN for enabling me to attend the 2014 ASN Kidney week to see it and all of the ground breaking research presented. These opportunities are vital to the ongoing participation of Australian nephrologists and researchers in the internationalized arena of renal research.

Kim O’Sullivan

Research Presented - Neutrophil and macrophage extracellular traps and extracellular myeloperoxidase are prominent in human anti neutrophil cytoplasmic antibody associated vasculitis.

I am grateful to the Australian and New Zealand Society of Nephrology for the financial support which allowed me to attend Kidney Week 2014 in Philadelphia. I attended the early program for Advances in Research-building a kidney from stem cells to function. The course allowed me to further understand the building blocks of the developing kidney, and how both endogenous and exogenous cells can be used to aid repair and regeneration of damaged kidneys. The quality of presentations were outstanding, in particular the presentation on the zebra fish as a model to study kidney regeneration was fascinating as was the use of both human and mouse pluripotent stem cells to regenerate kidney structures.

I presented my abstract titled “Neutrophil and macrophage extracellular traps and extracellular myeloperoxidase are prominent in human anti neutrophil cytoplasmic antibody associated vasculitis”, in the New Mechanisms in Renal Injury session. The
presentation was well received and many insightful questions and suggestions have been now been implemented to improve the study.

The Basic and Clinical Science Symposium on ANCA-Associated vasculitis was of great value to me, firstly because it is my area of research interest, and secondly because many of the speakers were pioneers in this area of research, and spoke eloquently. As a basic scientist it was invaluable to attend a conference which hosted sessions on the most recent developments in potential new therapies for ANCA-Vasculitis, and to see the translation of basic research at the lab bench resulting in new therapies for the patient.

Beside the educational aspect of this conference, I was also able to meet with our research groups main collaborators, past colleagues and meet future contacts, and for this I am grateful to the ANZSN.

Victor G. Puelles

This meeting facilitated the dialogue between my group and international collaborators. Furthermore, I have gained a better understanding of certain technological advances in my field, mostly on podocyte biology, and have considered using some of them in our research projects.

As a personal note, this meeting allow me to discuss possible postdoctoral positions in multiple laboratories in USA and Germany.

This meeting also gave me the possibility to present my work, which lead to productive discussions with junior and senior researchers with invaluable feedback and constructive criticism.

Siah Kim

I would like to express my appreciation for the generous 2014 ASN Travel Grant provided by the ANZSN and its members. This enabled me to attend my first Kidney Week in Philadelphia Nov 14-16, and also the one day pre-conference program entitled “Innovation in Kidney Disease, Dialysis and Vascular Access”.

Previously at all the conferences I have attended, there has not been a focus on new technologies, and discussions about device or product development. The first two hour block was about patent law and the regulatory process for medical devices, which I was unfamiliar with. Although most of the new technologies presented were in still in development, I found the presentations about selective lipopolysaccharide cytophoresis and the polymixin B cytokine absorption columns promising for reducing sepsis related morbidity and mortality, and look forward to hearing the outcome of the randomised controlled trials which are currently underway. I also was interested to hear from Dr Micah R Chan about an inside out catheter placement technique, where an anterior approach is used to enter the R atrium to overcome SVC stenosis.

Highlights from the Kidney Week main program were the plenary lectures from both Dr Douglas A Melton and Dr Eske Willerslev. Dr Melton’s plenary centred on the development of glucose sensitive insulin secreting beta pancreatic islet cells from stem cells, and I appreciated the rigorous and methodical way he and his team discovered the cytokine soup needed to achieve this. Dr Willerslev’s presentation on determining the history of the human species using whole genome sequencing was equally fascinating, and I look forward to hearing about his planned research identifying target genes for diabetes susceptivity in Aboriginal Australians. I was also engaged by the joint ISN/ASN session on 0 by 25 initiative to reduce deaths from AKI across low and middle income countries, currently in early stages of development.

As a paediatric nephrologist, I was particularly interested in Dr Hilderbrandt’s update on the genetics of SRNS, and was particularly interested by the ADCK4 mutation which reduced Co-enzyme Q10 biosynthesis, with partial remission reported with oral coenzyme Q10.
Reports from East Asia suggest the prevalence of this mutation among children with SRNS is significantly higher than in Europe and North America. With the advent of affordable next generation sequencing, identification of this variant among our patients with SRNS will be easier. I was also interested in the session on Antibody Mediated Rejection, although it was depressing to hear there has not been much progress in identifying the optimal management of clinical and subclinical donor specific antibodies.

I presented two posters during the course of Kidney Week, which gave me the opportunity to discuss my PhD research with adult and paediatric nephrologists from across the world. I also had the opportunity to meet a number of other Australian nephrologists over the course of the conference, and was delighted to hear the results of the ACTIVE dialysis trial, presented by Dr Meg Jardine at the High Impact Clinical Trial Session.

Thanks again to the ANZSN and its members for the generous travel grant which allowed me to attend Kidney Week 2014.

Stefanie Stangenberg

I would like to thank the ANZSN for awarding me a travel grant to attend the 2014 American Society of Nephrology Kidney Week in Philadelphia.

I suspect that most of the 13,000 attendees have shared the same dilemma: the difficulty to decide which lectures and sessions to attend. The range and depth of the basic and clinical science sessions was very impressive, so was the almost overwhelming vastness of the poster exhibitions. Building New Paths to Kidney Health by moving forward via new roads in new directions was one of the key themes addressed in the opening session by ASN president Sharon M Moe. This theme was then reflected in the choice of various excellent plenary sessions. One would not have thought to be at a kidney conference listening to the State of the Art lecture delivered by a world expert in Nanotechnology (Prof Chad A Mirkin, North-western University, Illinois). Likewise Prof Eske Willerslev from the University of Copenhagen, Denmark an internationally recognized researcher in ancient DNA who has led research expeditions to collect fossils and glacier ice for ethnographic information informed us about his studies on evolutionary biology. But isn’t this part of the “New Path to Kidney Health” to be inspired and encouraged to obtain knowledge outside our area of expertise in order to advance science in nephrology?

A standout session on the role of mitochondria in kidney diseases appropriately titled, “A Riddle Wrapped in a Mystery inside an Enigma” was presented by Douglas C. Wallace, PhD. He introduced the concept of bioenergetics and started off explaining that Medicine should not only look at structure, i.e. anatomy and organ specific change but also at energetics. Mitochondria are key to providing and regulating energy. Subtle energetic defects throughout the body would specifically affect those organs that have high energy requirements, such as the kidney. He reminded us that research has traditionally ignored energetics and the mitochondrion but judging by the subsequent talks, interest in mitochondrial pathology is emerging. Rick G. Schnellmann, PhD, then presented research from his group, which focused on mitochondrial dysfunction in AKI. Using a high throughput respirometric assay, they have found several inducers of mitochondrial biogenesis that seem promising in restoring mitochondrial and renal function after experimentally induced AKI. Moreover, Hazel H. Szeto, MD, PhD, introduced us to cell permeable antioxidant peptides that specifically target mitochondria providing mitochondrial stability when given before experimental ischemia while preventing inflammation and fibrosis long term.

The travel grant enabled me to present two posters on mitochondrial dysfunction and oxidative stress induced by maternal smoking highlighting the role of fatal programming of renal disease. I am grateful for valuable
feedback and constructive suggestions to expand this research. The conference provided great opportunity to interact with other researchers and clinicians. Once again, I thank the ANZSN for their financial support to attend this meeting.

Dr Sven-Jean Tan

I would like to thank the ANZSN for awarding me this grant, affording me the opportunity to attend the American Society of Nephrology Kidney Week meeting in Philadelphia this year and to present two posters, “Relationship Between Timed Urine and Spot Urine Collections For Measurement of Phosphate Excretion” and “Biological Variation and Analytical Stability of Serum Soluble α-Klotho in Healthy Volunteers”. This experience has been invaluable as I was not only able to present my research and meet other researchers who are influential in this field, but I was also exposed to the international scope of research within my small area of interest as well as throughout the different fields of experimental and clinical nephrology. The informal poster sessions provided me critical feedback on my own work and opportunities for me to discuss with other researchers their work in similar subjects of interest.

This was also my first attendance at the ASN Kidney Week and indeed similar to many first time attendees of this conference, my first impression was really the mammoth scale of the event. Likewise the representation from the rest of the globe at this conference is remarkable. The only downside to this event was the weather with an arctic chill and subzero temperatures embracing most of North America in the same week.

The wide range of concurrent sessions unfortunately also meant that decisions on which sessions to attend were difficult. A particular highlight of these sessions for me was the symposium titled “Mapping the Alignment of the Spheres of Phosphate, FGF23 and Klotho”, where several leading clinician scientists presented a summary of their ongoing research into the area consolidating much of what has been published in the field.

I would like to thank the ANZSN again for their generous support. This meeting is indeed an eye-opener for those who have not been and will continue to be an event I am hopefully able to attend again in the future.

Tim Williams

The 2014 ASN annual meeting in Philadelphia provided me with the opportunity to present my research to a large number of scientists and attend many presentations in my field of interest.

I presented my work in the form of a poster as part of the “Renal Immunology and Inflammation” session on Thursday 13th November. Discussing and comparing my work with other presenters in my category was very beneficial due to similar topics and related experiments (e.g. injury models, specific cytokines assessed, determination of repair). I also met many other scientists, both senior and early career, during my presentation. It was great for me to explain my work and hear their opinions and suggestions for future studies. I also made a number of new contacts.

The oral presentations were also very interesting and informative. With the size of the conference and large range of topics, many of the sessions contained research closely related to my line of work. These talks were often presented by world leading scientists who I have not had the chance to listen to or meet in Australia. Following are the sessions that I found particularly interesting:

Thursday 13/11 –

- State-of-the-art lecture from Douglas Melton: “Stem Cells to Understand and Treat Diabetes”
- Basic and Clinical Science Symposia – Getting to the action: Renal Microphages and Dendritic Cells in Homeostasis and Injury - 1
• Oral abstract session – AKI: Cellular Responses to Injury and Repair I
  Friday 14/11 –

• Basic and Clinical Science Symposia – Hiding in Plain Sight: The Cellular Origin of Kidney Repair after AKI

• Oral Abstract Session – AKI: Cellular Responses to Injury and Repair II
  Saturday 15/11 –

• I’m Hot and Bothered: Kidney Inflammation in AKI

David Tunnicliffe

I would firstly like to thank ANZSN for the provision of the ASN 2014 Travel grant that funded my recent trip to Philadelphia to attend the American Society of Nephrology, Kidney Week 2014 conference. As a 1st year higher degree research student this was my first international conference, the enormity and the general atmosphere was inspiring as I felt that there was a real dedication to furthering research and improving patients’ lives.

The science presented at the conference from plenary sessions to posters was of the highest quality. The plenaries from experts outside of nephrology were thought provoking; Professor Melton Thursday morning plenary on Stem cell use in understanding and treating diabetes was fascinating and stood out to me as a highlight of the conference. Sessions never disappointed, being in the same room and listening too many of the experts whose work I have read was a fantastic opportunity as it provided a real clarity to the current state of the literature. The session ‘Lupus nephritis: The wheels are turning but are we moving?’ and the late breaking clinical trial session particularly the HALT presentations were examples of two such sessions and provided immeasurable knowledge for me.

On a more individual level, the poster sessions were a great chance to meet people from across the world and also to learn about methodologies that could be adapted to my work. Presenting posters was a learning experience for me, the ability to summarise succinctly in the brief moments you have with people and also engaging people are skills that I have started to develop because of this conference.

Overall my experience at ASN 2014 Kidney Week was exciting, educational and motivating. I hope in the future to attend, present and learn at another international conference. Thank you for the opportunity.

Andrea Wise

The 2014 American Society of Nephrology annual meeting, which was held in Philadelphia, was the largest and most diverse kidney conference I have attended during my PhD candidature. There were many highlights obtained from the meeting that have been briefly outlined below.

Having the opportunity to present my poster was of great benefit as I was able to speak to several other researchers in the field who provided me with valuable advice of how I could strengthen my results. I was able to make new contacts, which I have had communication with since returning from the conference. In addition, I was able to meet researchers who my laboratory already has existing collaborations with, who I have not had the opportunity to meet before. As a result we were able to discuss work in person and strengthen existing relationships.

Seeing the leading researchers in the field present their most up to date work and hearing the latest opinions/discussions from the research community (audience) was also very beneficial. The sessions which were particularly interesting for me included the state-of-the-art lecture ‘stem cells to understand and treat diabetes’ presented by Douglas Melton, getting to the action: renal macrophages and dendritic cells in homeostasis and injury, hiding in plain sight: the origin of kidney repair after AKI and I’m hot and bothered: kidney inflammation in AKI. Overall the large conference gave me a much more exposure to basic science research (particularly acute kidney injury and regeneration) that is currently being undertaken, which was not of the same scale at the 2014 ANZSN annual meeting held in Melbourne.
2015 ANZSN International Travel Grants

ERA-EDTA London

Stella Setyapranata

The travel grant to ERA-EDTA in London enabled me to present my research as a poster and provided the opportunity to learn more about the research that is currently happening in the nephrology world.

The research I presented reported that platelet counts in patients with autosomal dominant polycystic kidney disease is no different in the group of patients with chronic kidney disease and transplant kidney, when compared to the control group. However, in the dialysis population, patients with autosomal polycystic kidney disease had lower platelet count compared to the control group. Although this was statistically significant, it is likely clinically insignificant due to the small difference.

The highlight of the conference was the continuing medical education session which was held on the first day of the conference. I attended the immune mediated renal diseases which summarized the latest research and developments in this area. There were a wide range of topics in the fields of transplantation, dialysis, obstetric medicines that were discussed during the rest of the conference. These gave me an excellent overview of the current knowledge in various aspects of renal diseases which are highly relevant in my clinical practice.

Attending the conference allowed me to explore the leading edge of current research in nephrology and open my mind and options for my future. I am grateful for the support of the Australia and New Zealand Society of Nephrology.

International Congress of the International Society for Haemodialysis

Andrea Viecelli

I would like to sincerely thank the Australian and New Zealand Society of Nephrology for awarding me a travel grant to present my poster at the International Congress of the International Society for Haemodialysis 2015 in Kuala Lumpur.

The meeting was well organized to accommodate over a thousand delegates. Distinguished lectures were given by leading experts in the field of haemodialysis. Among the many excellent lectures highlights included a debate entitled ‘Which one is better? Short term daily haemodialysis or long-term nocturnal haemodialysis’ presented by Professor Michael Rocco and Professor Robert Pauly, which provided a critical and comprehensive review of the current literature. I also enjoyed the inspiring and thought provoking presentation on ‘green dialyses by Professor John Agar that highlighted the substantial water and power consumption of haemodialysis and ways to reduce water and energy wastage. I also gathered new knowledge on managing vascular access complications, on iron-based non-calcium containing phosphate binders and on challenges and benefits of home haemodialysis. My poster presentation on the baseline characteristics of the FAVOURED trial was well received and lead to productive discussions with research colleagues; amongst others Dr Hooi, Malaysian co-investigator of the FAVOURED trial (see photo attached).

Kuala Lumpur provided a fantastic and spectacular venue for the conference with magnificent views of the famous Petronas Twin Towers from the convention Centre. The conference opening ceremony as well as the Gala dinner showcased local customs and traditions, with traditional dance performances and Malaysian cuisine.

Overall it was an excellent experience listening to multiple world-class speakers and gathering crucial information for my future career. I would like to express my gratitude again to ANZSN for such a valuable opportunity.
2015 ISN World Congress of Nephrology WCN, Cape Town, South Africa.

Gillian Balbir Singh

This was my second WCN, and having been part of a fantastic congress in Hong Kong in 2013, I was very much looking forward to this one. Thank you to the ANZSN for providing me this Travel Grant and the opportunity for travel to Cape Town, South Africa, for what was in my opinion the most memorable of conferences. From the opening address by Nobel Peace Prize winner Archbishop Desmond Tutu, to plenaries and humbling award acceptance speeches by nephrology top guns including Drs. Barry Brenner, Georgi Abraham and Kirpal Chugh, the congress sparked with clear themes – the emphasis on AKI; where ISN has launched a 0by25 campaign, where no one should unnecessarily die of treatable AKI in the poorest parts of Africa, Asia and Latin America by 2025; the rapid growth of non-communicable on top of communicable kidney diseases in developing countries; and the growing aging population in developed countries. This congress was clinically themed with plenaries and oral presentations focused on epidemiology, risk factors, health outcome targets and the practical aspects of kidney patient care.

Highlights for me was participation in the African kidney registry workshop which saw participation from delegates from all over Africa, the Cochrane Renal Group workshop, the session “Bridging the gap: Transitions between and within dialysis and transplantation”, particularly the talk on transitioning the paediatric kidney transplant and dialysis patient into adult care and transitioning the patient from transplantation to dialysis, the excellent thought provoking lecture by Professor Tom Kirkwood from the UK on physiology, diseases and aging, and above all, the daily moderated poster sessions which allowed for in-depth discussions on multitude of topics by delegates from all over the world. I was all the more fortunate and honoured to be able to present my own clinical research, a randomized controlled trial on remote ischemic preconditioning for the prevention of contrast induced nephrology which I undertook while on fellowship in South Korea. This received considerable feedback from the moderators and other participants and I am grateful for this experience and opportunity to be able to share thoughts with other delegates. I leave Cape Town satisfied to have gained new knowledge, future collaborations with other delegates, new friendships and renewal of old ones and continued enthusiasm and motivation for what we do as nephrologists.

Morgan Mannion

A sincere thank you to the Australian and New Zealand Society of Nephrology for providing me with the opportunity to participate at the 2015 World Congress of Nephrology in Cape Town. Once again the sheer scale of such a well planned and executed event was phenomenal and without doubt an invaluable experience I had to great pleasure of participating in. It was with great pride and with support by the ANZSN and my supervisor that I was able to present my research at a moderated poster presentation session on Monday the 16th March titled 1α-25-dihydroxyvitamin D3 and 25-hydroxyvitmain D 3 suppress CD3+ T cell activation following synergistic stimulation with interleukin-12 and interleukin-18 in vitro. I was grouped with either like-minded researchers to discuss my results with an international audience. I was further able to appreciate the other immensely valuable events highlights at the congress, and found numerous sessions that were incredibly insightful. The first session on management of mineral disorders in CKD and ESRD was of particular interest to me. The presentations by Markus Ketteler and Charlotte Keyzer probed into recent findings of vitamin D therapy and a study about relationship between plasma vitamin D levels and CKD risk.

The presentations highlighted that studies suggests that 60-80% at least of the world are vitamin D insufficient and that we require a level above 30 ng/mL for an
optimal calcium absorption in the gut. Vitamin D deficiency, levels below 20ng/ml plasma concentration, are associated with PTH increase and lead to secondary hyperparathyroidism. Current recommendations propose plasma levels of 20-60ng/mL and a dietary intake of 600-4000 IU per day as safe and unless patients have sarcoidosis of primary hyperparathyroidism.

Discussion on the Levin et al. Kidney Int. 2007 publication showed us that close to dialysis vitamin D insufficiency and deficiency affects 70% of CKD population by. A vitamin D study by Revani et al. Kidney Int. 2009 found deficient 25-hydroxivitamin D patients may cause secondary hyperparathyroidism (sHPT). This study also examined patients with lower vitamin D concluding their progression to dialysis and time to death were far greater than the general population. Furthermore, increases in vitamin D levels following supplementation with 40,000 IU per week with no adverse or sustainable effects on other blood systems, Marckman et al. NDT 2012.

Murine studies by Xiang et al. Am J Physiol. 2005 using VDR KO mice showed they developed significant ventricular hypertrophy and therefore one could treat these patients via supplementation with vitamin D analogues. This was tested in hypertensive rats showing the benefits of treatment of left ventricular hypertrophy with paricalcitol treatment (Bodyak N et al. Proc Acad Sci 2007). Also of interest was reiterated from 2006 the discussion of the induction of cathelicin and 1α – hydroxylase are upregulated by 1α,25-hydroxivitamin D synthesis by monocytes, Lui et al Science 2006.

The PREVEND study by Charlotte Keyzer determined that the general population had an increased risk of CKD (eGFR <60 ml/min/1.73m2) was associated with low plasma concentrations of 25-hydroxyvitamin D while 1α,25-dihydroxyvitamin D was not associated with CKD. This is suggested to be associated with vitamin D receptor modulation of the prorenin gene expression and excessive renin-angiotensin aldosterone system activation, and that the association of 25-hydroxivitamin D and 1α,25-hydroxyvitamin D with increased albuminuria by be caused by autocrine or paracrine activation of 25-hydroxivitamin D. These discussions and updates, as well as so many others beyond the limitations of this report, were immensely invaluable to my current and future research into vitamin D immunomodulatory therapy in CKD patients and reiterates the importance my niche of work.
Condolences

**Professor Paul Roy**

L. Paul Roy, BM BS BSc (Med) MD MRACP FRACP Emeritus Professor at University of Sydney and one of the founding fathers of paediatric nephrology passed away just before Christmas after a long illness. Paul trained at Sydney Uni and Royal Alexandra Hospital before going to Minnesota for his renal fellowship. He returned in 1972 to set up paediatric nephrology at Royal Alexandra Hospital including dialysis and transplantation before then moving to set up paediatrics at Royal Prince Alfred. He has had an exceptional academic and teaching career, having mentored many of the paediatric nephrologists in Australia. He is survived by his wife Joyce, his son Simon and daughter Jane and grandsons Nicholas, Max, and Liam. He will be sorely missed. On behalf of ANZPNA
Condolences

Vale Emeritus Professor Priscilla Kincaid-Smith

Australian nephrology has lost one of its legends. Priscilla Kincaid-Smith died peacefully at home on July 18th, surrounded by family, aged 88. Actively involved in the establishment of ANZSN, Professor Kincaid-Smith went on to become ANZSN President, Asia-Pacific Society of Nephrology Inaugural President and President of the International Society of Nephrology.

We pay tribute to a remarkable scientist, clinician-researcher, educator and advocate. The list of her achievements and honours in the field of nephrology and the medical profession is extraordinary. She is perhaps best known for her research demonstrating the links between headache powders and kidney damage. However, her pioneering research and clinical work covered diverse areas including blood pressure and kidney damage, kidney transplantation and hypertension in pregnancy. That she accomplished what she did, carving out a career at a time when married women were actively discouraged from following clinical careers, is testament to her determination. A true pioneer and leader, she was one of the architects of the field of nephrology in Australia, in Asia and indeed globally. Her influence on our discipline and on those she mentored will continue to be felt for generations. Truly a life very well lived.

A brief list of her positions/ accomplishments:

Director of Nephrology, The Royal Melbourne Hospital 1967-1991
Professor of Medicine, University of Melbourne 1975-1991
Physician in Nephrology, Royal Women’s Hospital 1976-1991
Professor Emeritus at the University of Melbourne 1991
President of the Australasian Society of Nephrology 1970-1972
President of the International Society of Nephrology 1972 - 1975
President of the Royal Australasian College of Physicians, 1986 – 1988
Chairman at the Australian Medical Association Federal Council 1990 – 1995

President of the World Medical Association 1994 – 1995
Commander of the Order of the British Empire (CBE) 1975
Companion of the Order of Australia (AC) 1989
David Hume Award from the National Kidney Foundation (USA) Inc. New York 1989
Leon Chesley Award from the International Society for the Study of Hypertension in Pregnancy 1990
Sir William Upjohn Medal from the University of Melbourne 1992
John F. Peters Award received from the American Society of Nephrology 1993
Life Fellow of Royal Australasian College of Physicians 1996
Australian Achiever Award received from the National Australia Day Council 1997
75th Jubilee Medal (Health Sciences) received from the University of Witwatersrand 1997
Jean Hamburger Award received from the International Society of Nephrology 1997
Notices

Australian and New Zealand Society of Nephrology

Retirement of Aviva Rosenfeld from the ANZSN & TSANZ

Aviva Rosenfeld has been an integral part of the ANZSN and TSANZ for many years and those who had the privilege of working with her appreciated her enthusiasm, hard work and dedication to both Societies.

Aviva has been with the ANZSN and TSANZ for 19 years, working predominantly as the chief Executive Administrative Officer. She has been described by many as the backbone of the Society.

After many years of outstanding service, Aviva has retired from the ANZSN. Her corporate knowledge and memory of the ANZSN, as well as her engaging personality, will be sorely missed.

Professor David Harris, a Past President of the ANZSN (2002-2004), described Aviva as hardworking, respectful of everyone, extremely organized and always welcoming, commenting that he may have enjoyed working with her more than any other individual in his professional life.

Professor Randall Faull, another ANZSN Past President (2008-2010) who also worked very closely with Aviva for about 14 years, described Aviva as unfailingly helpful, well organized and a delightful person to work with. He described her corporate memory as invaluable and always highly reliable.

Aviva was regularly acknowledged at ANZSN and TSANZ Annual Scientific Meetings, but these were really the only times her public face was recognized. Behind the scenes though, her efficiency and meticulous work ethic were integral to the organization of meetings and conferences as well as the general oversight of the ANZSN and TSANZ.

Aviva was a large part of the heart and soul of our Societies, loved by all, and will be deeply missed in this regard by all who knew her.

We thank Aviva for her amazing contributions to ANZSN and TSANZ and wish her well.

Professor Alan Cass

President ANZSN

Steve Chadban

President TSANZ
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Please note, during the 2015 summer holidays the ANZSN Office will be closed Thursday the 24th December 2014 reopening Monday 4th of January.