Mission

THE INTERNATIONAL SOCIETY OF NEPHROLOGY (ISN) IS ADVANCING KIDNEY CARE WORLDWIDE. THROUGH OUR SCIENTIFIC AND CAPACITY-BUILDING ACTIVITIES IN ADVOCACY, EDUCATION AND RESEARCH, WE BRIDGE GAPS IN GLOBAL KIDNEY CARE, ENGAGING IN A COLLABORATIVE EFFORT TO IMPROVE KIDNEY DISEASE PREVENTION, DIAGNOSIS AND TREATMENT.

With over 9,000 professional members from over 150 countries, the ISN represents a wide international network and an efficient platform for timely scientific exchange, debate and communication between healthcare professionals involved in preventing and treating kidney disease.

By collaborating with more than 90 national and regional societies, we reach out to an additional 30,000 health professionals globally. Our overarching purpose is to tackle the global burden of Acute Kidney Injury (AKI) and Chronic Kidney Disease (CKD), improving patient care through an interconnected advocacy, education and research strategy.
By focusing on advocacy, education and research, we are highlighting the importance of prevention and working towards more sustainable, equitable and ethical care for all people with AKI and CKD.

Our programs, initiatives and activities advocate for the health and care of patients, provide education opportunities tailored to the global nephrology community and improve research opportunities.
Emerging (low- and lower-middle income) countries, with a combined population of more than 3 billion people, cannot afford renal replacement therapy for the majority who need it, which results in the deaths of 5 to 8 million people around the world annually from untreated kidney failure. Indeed, more than 90% of individuals receiving renal replacement therapy live in the developed world (upper middle- and high-income countries).

Between 8 and 10% of the adult population have some form of kidney damage. Every year, millions die prematurely of complications related to Chronic Kidney Disease (CKD).

Dehydration

In low-resource settings, AKI develops because of infections and severe dehydration caused by gastroenteritis and malaria. Victims of natural disasters such as earthquakes may die of acute kidney injury due to their crush injuries.

Risk factors

Risk factors include diabetes, hypertension, family history of kidney disease, kidney stones and ethnicity. South Asians, Asians, those of African descent and indigenous people of Australia, Canada, The Americas have a higher chance of developing CKD. This is due in part to high rates of diabetes and high blood pressure in these communities.
Kidney disease is common, harmful and often treatable. Simple blood and urine tests can detect CKD and low-cost treatments can slow the progression of the disease, reduce the risk of associated heart attacks and strokes, and improve quality of life.

Globally, 2.6 million patients with end stage kidney disease (ESKD) received dialysis in 2010 and this number is projected to almost double to 5.4 million by 2030.

Prevention

In low- and middle-income countries long-term dialysis is unaffordable. The best hope for reducing the human and economic costs of CKD and ESKD lies in prevention.

CKD

Kidney disease is common, harmful and often treatable. Simple blood and urine tests can detect CKD and low-cost treatments can slow the progression of the disease, reduce the risk of associated heart attacks and strokes, and improve quality of life.

Access to dialysis or transplantation

The majority of patients with kidney failure in emerging countries do not have access to dialysis or transplantation and every year 5 to 8 million worldwide die because they can’t receive Renal Replacement Therapy (RRT).

AKI

A greater awareness of Acute Kidney Injury (AKI) is needed among all health workers. There are also important opportunities for prevention, especially by paying careful attention to prescription management for the elderly. Many cases of AKI can be prevented simply by educating the community and local workers about prevention and early warning signs requiring immediate intervention.

ESKD

The number of patients diagnosed with ESKD globally is increasing at a rate of 5-7% per year.
OUR PURPOSE AND WHO WE STAND FOR

We support 9,389 doctors and other healthcare professionals from over 150 countries. 20% of our members are young nephrologists – seen as the life blood of our Society.

A lot has happened in the last two years…

Our educational programs have enabled us to reach out to and support 84 ISN Fellows, who can now share their new skills and advance care in their region.

Through our Sister Renal Centers and Sister Transplant Centers Programs, we have built 67 partnerships, giving renal centers in low-resource settings and those in developed countries the chance to learn from each other and set up new treatments, screening and transplant programs where nephrology services are restricted or unavailable.

44 ISN Educational Ambassadors have dedicated their time, valuable expertise and travelled far and wide to teach local medical professionals.

OUR MEMBERS

9,389 members

158 countries

Top 10 countries

- UNITED STATES: 1,553
- JAPAN: 658
- CANADA: 603
- INDIA: 598
- AUSTRALIA: 332
- UNITED KINGDOM: 277
- THE NETHERLANDS: 260
- PHILIPPINES: 411
- CHINA: 377
- UNITED KINGDOM: 277

Regional Breakdown

- NORTH AMERICA: 24%
- WESTERN & EASTERN EUROPE: 18%
- NORTH & SOUTH AMERICA: 14%
- OCEANIA & SOUTH EAST ASIA: 11%
- SOUTH ASIA: 9%
- AFRICA: 8%
- LATIN AMERICA: 8%
- MIDDLE EAST: 5%
- EASTERN & CENTRAL EUROPE: 2%
- NIS & RUSSIA: 1%

Affiliated Societies
ISN reaches nearly 30,000 nephrology-related professionals through its partnerships with its affiliated societies.
staff about the latest breakthroughs, skills and techniques, making for a stronger more self-sufficient and globally-minded medical community.

In research…

In 2015 and 2016, we awarded 13 clinical research grants to investigators to fund screening and intervention studies as well as local clinical research and acute kidney injury studies. These projects are taking place in the regions of Oceania and South East Asia, Latin America and Africa.

In the classroom…

76 Continuing Medical Education courses brought training to about 14,000 healthcare professionals who don’t have easy access to the most recent educational resources.

GRADUATED SISTER RENAL CENTER PAIRS

67 active center pairs  16 graduated pairs

$2,000,000 USD
YEARLY BUDGET FOR ISN PROGRAMS
WE STRIVE TO POSITION KIDNEY DISEASE HIGHER UP ON HEALTH POLICY AGENDAS WORLDWIDE. ALL PEOPLE WITH CHRONIC KIDNEY DISEASE AND ACUTE KIDNEY INJURY SHOULD HAVE ACCESS TO SUSTAINABLE, EQUITABLE AND ETHICAL CARE.
The burden of kidney disease is too often neglected by health authorities and governments. Through our advocacy efforts, we ensure that kidney health is represented by a truly international voice on health-related global, regional and national policy developments.

Adeera Levin, ISN President

With the ISN Global Kidney Health Atlas, we aim to map the burden of kidney disease worldwide, identify where the gaps are and what needs to be done to fill those gaps.

David Johnson and Aminu Bello, Project Leaders of the ISN Global Kidney Health Atlas
WE BRIDGE LEARNING GAPS AND BUILD GLOBAL NEPHROLOGY CAPACITY BY OFFERING HANDS-ON AND TAILOR-MADE TRAINING COURSES, RESPONDING TO THE EDUCATION NEEDS OF DOCTORS AROUND THE WORLD SO THEY CAN IMPROVE CARE AND CREATE SUSTAINABLE TREATMENT PROGRAMS FOR THEIR PATIENTS.
While identifying a physician with the passion and commitment to lead the program, it is important to train a team who will deliver long-term sustainability.

Pediatric nephrologist Mignon McCulloch on the Saving Young Lives training session at the World Congress of Nephrology 2015 in Cape Town, South Africa

I would recommend that other institutions with poor infrastructure participate in the ISN Programs as it will help to improve the quality of patient care immensely.

Ikechi Okpechi, ISN Program participant from University of Cape Town, trained doctors at Usmanu Danfodiyo University Teaching Hospital in Sokoto, Nigeria

ISN Continuing Medical Education courses give participants a chance to interact with experts in nephrology.

ISN Programs are helping doctors experience hands-on and engaging workshops in their regions.

Picking up skills to care for patients in low-resources settings is helping doctors face their daily challenges.
RESEARCH

WE SET OUT TO RESOLVE INEQUALITIES BY LENDING SUPPORT TO MORE RESEARCHERS SO THEY CAN GATHER COMPREHENSIVE EVIDENCE ON THE STATUS OF KIDNEY DISEASE GLOBALLY - HELPING THEM BETTER UNDERSTAND AND MANAGE CHRONIC KIDNEY DISEASE AS WELL AS ACUTE KIDNEY INJURY, AND ENCOURAGING THEM TO INVESTIGATE NEW AREAS OF RESEARCH.

Global leaders shared their vision on the challenges in designing and running trials on kidney disease, and sketched out some potential solutions.

ISN-ACT Chair Vlado Perkovic on the research session at WCN2017
The Hydration for Kidney Health grant will improve knowledge, strengthen ties with a very important science institution and provide expertise to keep investigating the relationship between hydration and kidney health in my country.

Fabiana Nerbass, Hydration for Kidney Health New Investigator Grant winner from the Fundação Pró-Rim in Joinville, Brazil

Danone Nutricia Research and the ISN have collaborated to create the Hydration for Kidney Health (H4KH) research initiative to stimulate the interest of established and new researchers to explore the role of hydration in kidney health.

Through collaboration and interaction, the ISN International Network of Chronic Kidney Disease cohort studies (iNET-CKD) seeks to understand how CKD progresses.

The ISN Advancing Clinical Trials (ACT) is working to generate more high-quality clinical trials and studies in nephrology.
THE CHALLENGE OF ACUTE KIDNEY INJURY (AKI)

The 0by25 initiative was launched at the 2013 World Congress of Nephrology in Hong Kong. In creating this endeavor, ISN set out an ambitious vision for a world in which no one dies of preventable and treatable Acute Kidney Injury (AKI) by 2025.

Four years on, the 0by25 Global Snapshot Study and AKI Pilot Feasibility Project are the next steps in this ambitious enterprise.

The results of the 0by25 Global Snapshot Study were announced at the 2015 World Congress of Nephrology and published in The Lancet. Research focused on 324 centers in 72 countries, involved 4,022 patients and was endorsed by more than 20 national and regional nephrology societies.

The study confirmed a limited availability of dialysis facilities in low- and low-middle-income countries, and a need for continued work with governments to ensure access to treatment for all. Hypotension (40.2%) and dehydration (38.2%) were identified as the most prevalent causes for AKI across all countries, which seems to support a standardized approach for early recognition and treatment.

Overall, AKI mortality at seven days was calculated at 11% and was higher in low- and low-middle-income countries than in high-income countries, meaning that AKI must be tackled in these more vulnerable communities.

0by25 AKI Pilot Feasibility Project
Towards the end of 2016, the 0by25 AKI Pilot Feasibility Project was launched in Asia, Africa and South America. This project assesses the feasibility of implementing interventions to optimize AKI education, training and care. The main objective is to establish a sustainable infrastructure for early detection and management of AKI, which can be implemented based on local needs and resources.

Initial study results, based on the hundreds of patients recruited, were presented at the World Congress of Nephrology 2017 in Mexico City.
A partnership between ISN, the International Pediatric Nephrology Association, the International Society for Peritoneal Dialysis, EuroPD and the Sustainable Kidney Care Foundation, Saving Young Lives (SYL) develops sustainable programs for treating AKI in sub-Saharan Africa and elsewhere. The SYL partnership has supported various hospital centers and set up several workshops to help doctors build sustainable programs for treating AKI, including trainings on dialysis, especially concentrating on cost-effective Peritoneal Dialysis (PD) treatment.

In December 2015, the Senegalese Society of Nephrology held its first course on dialysis in West Africa. The course tackled peritoneal and hemodialysis, and hosted side events for allied health professionals. Nephrology is developing fast in Senegal. The Centre Hospitalier Universitaire Aristide Le Dantec in Dakar is an important training hub, having hosted several fellows from neighboring regions.

SYL has helped develop acute PD programs in eight centers across Africa, where dialysis was previously unavailable. The partnership is currently working to establish treatment in three other sites. Between January 2013 and December 2016, 242 children and adults in these centers received dialysis.

Pediatric nephrologist Judith Aujo, from Uganda, joined the SYL training course on PD at Noura Children’s Center, Soba University Hospital in Khartoum, Sudan. She believes this training was an ‘eye opener on how much one needs to study in this field.’ Her colleague Peter Ntege adds that these initiatives ‘pull more doctors into nephrology.’
THE CHALLENGE OF CHRONIC KIDNEY DISEASE (CKD)

The ISN CKD Closing the Gaps initiative sets out to define the global needs and the current state of Chronic Kidney Disease (CKD), creating a blueprint for more balanced care worldwide, through advocacy, education and research.

To complement the ISN 0by25 initiative, which aims to eliminate preventable deaths from Acute Kidney Injury (AKI) worldwide by 2025, the ISN CKD Closing the Gaps initiative is made up of several sub-projects, currently including the ISN Global Kidney Health Atlas (GKHA), ISN Global Kidney Health Summit, the ISN Global Kidney Policy Forum and The Lancet Kidney Campaign. These serve to integrate future endeavors through ISN Programs and educational activities.

The ISN Global Kidney Health Atlas (GKHA)

Renal registries in developed countries are mainly concerned with end-stage renal disease, dialysis and/or transplantation. Little data exist on the early stage of the disease, especially about patients in emerging regions where the largest burden is. Critical gaps in knowledge about the prevalence and incidence of CKD are affecting healthcare planning for patients globally.

The ISN GKHA builds on the work of Kidney Health for Life (KH4L), which was a limited multinational inventory in Western Europe, Canada and Israel. By creating a systematic data repository using the infrastructure of ISN’s Regional Boards and Affiliated Societies, the survey findings give a high-level overview of the current state of CKD and AKI care and how it is organized and structured worldwide.

The team behind the ISN GKHA collected vital information to collate according to the principles of the Universal Health Coverage (UHC). In the second half of 2016, they sent out a survey to national nephrology societies, kidney foundations, policymakers, patient organisations and advocacy groups from 125 United Nations Member States. Findings revealed significant inter- and intra-regional variability in the current capacity for kidney care across the world.

The ISN GKHA aims to outline a comparative analysis and data synthesis of the trends in the burden of CKD and its consequences across the world. It will become a platform for championing the cause using the identified gaps modeled on UHC domains and build the foundation for a global CKD care surveillance network.

An independent risk factor for infection, hospitalizations, cardiovascular diseases, and cancer, CKD has pervasive and permanent implications on patients’ identities, employment, relationships, and lifestyles. In consequence, there are about 2.2 million people receiving dialysis globally (projected to be 5.4 million by 2030).

The first ISN Global Kidney Health Summit

A selected group of 75 international key opinion leaders and researchers met for two and a half days in July 2016 at the University of British Columbia in Vancouver, Canada to set in motion a roadmap for action to change the status of kidney health worldwide, building on current knowledge, research and clinical activities.

This unique conference was chaired by Adeera Levin, Kai-Uwe Eckardt and Marcello Tonelli and attended by representatives from the international community, ISN committees and programs, scientists and policy-makers.

Under discussion were CKD issues of global relevance, in the context of the ISN GKHA, the interfaces between CKD and AKI, and the link between kidney disease and cardiovascular and metabolic disorders.
The ISN Global Kidney Policy Forum

On April 21, 2017, in partnership with the Mexican Ministry of Health and The Lancet, ISN brought together high-level decision-makers and stakeholders to address the burden of kidney disease in the Americas region and share strategies for prevention and improved management of the disease on a regional and global level.

Held during the World Congress of Nephrology 2017 in Mexico City, participants included representatives from national health ministries, international and regional health organizations, key opinion leaders and representatives of the wider health community.

The ISN Global Kidney Policy Forum was the first in a series of meetings to stimulate discussion with policy makers with the aim of making substantial changes to prevent and manage kidney care.

Subsequent ISN Policy Forums will continue to put forward policy proposals, sharing information and best practices on a regional and international level. The goal of these meetings is to improve the understanding of regional issues related to delivering kidney care and its funding, as well as highlighting and addressing the gaps identified in the ISN GKHA. The meetings will culminate in a clear call to develop policy proposals to support kidney health management, through information and best practices sharing at a regional and global level.

The Lancet Kidney Campaign


www.thelancet.com/campaigns/kidney
KIDNEY TRANSPLANTS - PUTTING SAFETY FIRST

Transplantation is the best and frequently the only life-saving treatment for end-stage renal disease. The World Health Organization has stated that almost 80,000 kidney transplants were performed globally in 2013. Although impressive, it is estimated that the activity represents less than 10% of the global need.

This acute organ shortage comes with its own set of challenges for kidney donors, recipients and doctors, as has the emergence of organ trafficking, a practice that continues to take place. Cases of unethical living and deceased kidney donation are still reported in Egypt, India, Mexico, Pakistan, the Philippines and Turkey.

ISN worked with The Transplantation Society (TTS) to set up the Declaration of Istanbul Custodian Group (DICG) in 2010, after the development and publication of the Declaration of Istanbul (DOI) on organ trafficking and transplant tourism was completed in 2008.

The DICG has put a strategic plan into place until 2018 to focus on key issues regarding transplantation. By setting up local strategies to improve ethical transplantation availability in specific countries it aims to provide much-needed guidance on travel and transplantation.

The DOI has helped to define organ commercialization and trafficking, as well as transplant tourism, and its principles have visibly raised awareness among the world’s medical practitioners about illegal organ transplantation.

‘Transplant tourism can also become a threat to public health,’ says Beatriz Domínguez-Gil, who co-chairs the DICG explaining the legal, ethical and clinical implications of transplant tourism. In the home country of patients who illicitly obtained an organ overseas, doctors face a guessing game in caring for them. They have no medical reports and cannot refer to a reliable healthcare professional about the procedure.

The DOI has already inspired changes in legislation. In Israel, the law was modified to define the meaning of travel for transplantation, which led to banning health insurance companies from reimbursing illegal transplant procedures. Closely collaborating with the TTS and the Chinese government, the DICG has worked to put a stop to the use of executed prisoners’ organs for transplantation in China.

Improvements in deceased donation are being highlighted in South Eastern Europe (under the leadership of Croatia), Latin America and in the Middle East.

To celebrate its 10th anniversary, the DOI’s text and definitions will be updated in the same way as the Declaration of Helsinki (created by the World Medical Association as a statement of ethical principles for medical research involving human subjects). It is a fitting tribute to the dedicated efforts of this international group of medical professionals who continuously ensure the safety of all kidney transplants patients worldwide.
In March 2016, after months of preparation and coordination, a team from the Liverpool International Transplant Initiative and the Royal Liverpool University Hospital carried out the first two kidney transplants on the West Bank at the An-Najah University Hospital in Nablus.

Before 2013, there were no transplant services available in Palestine and the first kidney transplant operation in the region was carried out at Al Shifa Hospital in Gaza thanks to the partnership with the Liverpool team. Following on from this success story, surgeons from the University of Michigan carried out kidney transplant operations at St-Paul's Hospital, Millennium Medical College (SPHMMC) in Addis Ababa (Ethiopia) in 2015. Further visits every four to six weeks will help with future procedures. In two years, local surgeons will take over.
Advancing global nephrology

TWO YEARS IN PICTURES

Our members and partners invested valuable time and efforts into helping advance nephrology worldwide. This snapshot in time reveals how we strike a balance in kidney health through advocacy, education and research activities.

MAY

Archbishop Emeritus Desmond Tutu becomes one of our honorary members. At the World Congress of Nephrology 2015 in Cape Town, he mentions his affinity with medicine and support for the global nephrology community.

OCTOBER

Cardio-renal pathophysiology and its link with immunopathology and inflammation is the focus of the ISN Forefronts Symposium 2015, taking place for the first time in China (Shenzhen) and encouraging new and wider cross-disciplinary collaborations.

SEPTEMBER

An ISN Regional Workshop is held in Saint Petersburg during the Russian Dialysis Society Congress’ Renal Week, a go-to-meeting to learn more about the region’s involvement in the ISN Programs.

DECEMBER

Saving Young Lives hosts a dialysis workshop for doctors in West Africa, focusing on peritoneal and hemodialysis to build programs for treating acute kidney injury.
JANUARY
Elsevier, a world-leading provider of scientific, technical and information products and services, takes over the publication of Kidney International, our flagship journal.

FEBRUARY
ISN-sponsored Pan-Palestine Nephrology and Kidney Transplant Conference helps share knowledge and leads to more kidney transplants in the region.

MARCH
On World Kidney Day, alongside The Lancet we launch an online campaign to raise awareness of kidney disease to the international health community.

APRIL
Berlin welcomes basic researchers, clinicians and industry representatives for the Nexus Symposium. The talks cover translational immunology in kidney disease and new therapies for renal immunopathology.
Vincent Garvey and his team receive the Affordable Dialysis Prize for developing low-cost and innovative dialysis technology. Worth US$100,000, this prize was made possible thanks to ISN support and that of the George Institute for Global Health (Australia), Asian Pacific Society of Nephrology and the Farrell Family Foundation.

MAY

The Lancet publishes the outcome of the 0by25 AKI Global Snapshot Study, involving 324 centers, 72 countries and 4,022 patients.

APRIL

ISN and Elsevier announce the launch of Kidney International Reports, a bi-monthly open access journal publishing leading research and developments related to kidney disease.

JUNE

ISN, the American Society of Nephrology and the European Renal Association – European Dialysis and Transplant Association sign a declaration of collaboration.

JUNE

MAY
JULY

We launch the ISN Global Kidney Health Atlas survey and 75 key global opinion leaders and researchers meet in Vancouver for the ISN Global Kidney Health Summit.

SEPTEMBER

University of California San Diego hosts the ISN Forefronts Symposium 2016. Seen as the bed of fundamental knowledge on metabolites, it is the ideal location for discussing the metabolome and microbiome connection with kidney disease.

NOVEMBER

We relaunch World Kidney Fund, our charitable foundation, in a bid to generate more funding for training young professionals from the emerging world. We also nominate several Regional Centers of Excellence.

APRIL 2017

Around 5,000 nephrologists and related professionals congregated in Mexico City for the World Congress of Nephrology 2017. It was the first time our premier congress focused on the theme of diabetic nephropathy.
STANDING UNITED

Celebrated on the second Thursday of March, World Kidney Day has become the most successful effort to voice concern about the burden of the disease to policy makers and the public. It continually raises awareness about the importance of kidney health to reduce the impact of kidney disease and its associated health problems.

Raising a glass of water

March 12, 2015 marked the campaign’s 10th anniversary. The theme Kidney Health for All was particularly meaningful as it highlighted the effects of chronic kidney disease in disadvantaged populations.

50 million people talked about World Kidney Day. Online exposure rose to 33,000 mentions. Many of us drank a glass of water to raise awareness about the importance of kidney health, reaching 2 million people and sharing more than 4,000 pictures on social media.

Many shared the Eight Golden Rules for Healthy Kidneys and made great use of all the campaign material. The World Kidney Day editorial was published in a record-breaking 70 journals. As in recent years, there was great social media activity with 44,500 fans on Facebook, 7,670 followers on Twitter, 500 Instagram followers and 77,900 views on YouTube.

In total, #worldkidneyday was shared by 87 million people. On the day, many participants also shared 1,500 fun and colorful selfies of their feet in action. #MoveYourFeet4WKD reached two million people.

www.worldkidneyday.org

Staying fit, moving your feet!

In 2016, the world literally stepped up to spread the word. The campaign set its sights on communicating about how much adult kidney disease is initiated in childhood.

Over 600 events were organized in more than 80 countries, including the United States, Hong Kong, Mexico, Brazil, Ghana and Turkey. Tajikistan, located on the borders of Afghanistan; China; Kyrgyzstan and Uzbekistan, took part in the celebrations for the first time.

WKD has become a tradition in Mexico. In 2016, celebrations were organized by Asociación Ale, kidney foundations and patient associations in Mexico City, with the Ministry of Health representative, directors from the Hospital Infantil de México and the National Pediatrics Institute, as well as the President of the Health Commission of Mexico’s House of Representatives.

Guillermo Garcia Garcia, Co-Chair of the World Kidney Day Steering Committee

Celebrating World Kidney Day at Monash Medical Center in Melbourne, Australia.

Empire State Building in New York was lit up to celebrate World Kidney Day

La Sagrada Familia in Barcelona was lit up in celebration of World Kidney Day

Christ the Redeemer in Rio de Janeiro was lit up for World Kidney Day

American rap musician Freeway publicly endorsed World Kidney Day and helped spread the message

In total, #worldkidneyday was shared by 87 million people. On the day, many participants also shared 1,500 fun and colorful selfies of their feet in action. #MoveYourFeet4WKD reached two million people.
World Kidney Fund (WKF), ISN’s direct online fundraising platform, was set up in November 2014. It was relaunched in 2016 to focus on collecting more donations for specific ISN Programs.

The level and quality of nephrology training varies from country to country, especially in low-to-middle-income regions. This affects the kind of treatment patients receive and the impact acute kidney injury and chronic kidney disease have on health systems worldwide.

This platform gives individual donors the opportunity to help a fellow doctor in the emerging world undertake specialist training, enabling them to deliver lifesaving specialist care to their patients.

On the website, WKF presents the profiles of ISN candidate fellows looking for sponsorship to specialize in a specific area of nephrology. By highlighting their daily challenges, WKF aims to gather enough funding to respond to their needs.

Pradeep Shenoy, from the K.S. Hedge Medical Academy in Mangalore, is seeking support to gather crucial data to demonstrate how much heavy metals contribute to the progression of chronic kidney disease in India.

Thiago Gomes would like to learn the latest data collection methods from Ravindra Mehta at the University of San Diego to be able to conduct research on the causes and effects of acute kidney injury in Brazil.

www.worldkidney.org
THE FACES OF GLOBAL LEARNING

Our members actively participate in the ISN community in many ways. Membership testimonies reveal how exchanging knowledge through inter-regional training is creating stronger medical communities globally. The enthusiasm does not stop there. Now, we are also bridging gaps with online learning platforms and regional workshops.

Much can be achieved by building and working together. ISN Fellows return home with new knowledge and skills to set up independent treatment programs. Educational Ambassadors share expertise, responding to the unmet learning needs of medical communities across far-flung regions of the globe.

Hospital staff from renal centers in the emerging world join forces with centers of excellence to get hands-on training and build up capacity to improve patient care. In June 2016, doctors at Mbabane Kidney and Dialysis Center in Swaziland welcomed their Sister Renal Center counterparts. ISN Fellow Thandiwe Dlamini trained at University of Cape Town and became a consultant nephrologist at the center in Swaziland, helping bring together institutes in South Africa and her home country.

ISN Continuing Medical Education courses are the fruit of growing partnerships between ISN Affiliated Societies. They give doctors access to specific knowledge, become valuable networking opportunities and help advocate for kidney patient issues to governments in low-and-middle-income countries.

At the start of 2016, the ISN-sponsored Pan-Palestine Nephrology and Kidney Transplant conference helped share knowledge. Since then, thanks to the course, surgeons have performed over 20 kidney transplants in the region. The meeting was made possible thanks to a growing partnership between ISN and The Transplantation Society (TTS). The Sister Transplant Centers partnership began in 2013, between the Royal Liverpool University Hospital and the Al Shifa Hospital in Gaza, Palestine.

JOIN ISN

There is much to gain from joining our thriving community.

Join us in our strategy to prioritize advocacy, education and research. Sign up for membership and, together, we can advance nephrology worldwide.
5 REASONS TO JOIN

1. Receive our three journals: Kidney International (KI), KI Supplements and KI Reports (online access).

2. Be part of our educational programs and apply for research grants to build more nephrology capacity and enhance scientific expertise.

3. Get free access to ISN Academy, our online nephrology e-learning platform.

4. Take part at reduced rates in our World Congress of Nephrology (WCN) and ISN Frontiers meetings.

5. Support other ISN members in delivering more capacity-building programs to create more equitable access to nephrology care.

BECOME A MEMBER
www.theisn.org/join
**Fiji and Australia**

A Sister Renal Centers partnership between doctors in Fiji and Australia has helped set up a valuable ISN Continuing Medical Education course, uniting the country’s medical professionals to talk about better kidney health.

In Fiji, the incidence of stage five chronic kidney disease was recently estimated at around 680/million, the highest in the world. 30% of the adult population is diabetic so significant efforts need to be put into weight control and non-communicable disease prevention strategies. The meeting opened opportunities for more interest in acute peritoneal dialysis treatments in a country where many acute kidney injury cases are treated in intensive care through hemodialysis.

**ISN Fellow Sudakshina Ghosh** from Tanzania trained at the Madras Medical Mission in India, getting involved with The Tanker Foundation and helping the country’s poorest kidney patients. Dr. Ghosh gained hands-on training in chronic ambulatory peritoneal dialysis, hemodialysis and renal biopsy, and learned about awareness and prevention programs. Finally, she presented clinical research at the World Congress of Nephrology 2015 in Cape Town, South Africa.

**ISN Fellow Klara Paudel’s** dedication to nephrology is changing kidney patient care and research across Nepal. She says: ‘In the developed world, you can rely on someone senior for guidance. Almost all specialists in emerging countries must work on their own, relying on their own judgment and what they read in literature.’

‘In Jamaica, there are only nine adult and two pediatric nephrologists. To help more patients, the Caribbean Institute of Nephrology, through the Department of Medicine at the University of the West Indies in Jamaica, has established outreach clinics to help rural patients. The focus is on recognizing kidney disease early and slowing progression to end-stage kidney disease’ says Everard Barton who joined ISN to meet and collaborate with colleagues in scientific research and enhance training programs.

**THE REGIONAL PERSPECTIVE**

ISN Regional Workshops offer a chance to learn more about the ISN Programs and share common regional challenges about practicing nephrology, research and patient care. They are usually held in conjunction with regional nephrology congresses taking place globally. In September 2015, the Russian Dialysis Society Congress in Saint Petersburg included a regional workshop. This was followed by the presence of our leaders at the Chinese Society of Nephrology congress (November 2015), the Sociedad Latinoamericana de Nefrología e Hipertensión annual meeting (April 2016), the Asian Pacific Society of Nephrology (September 2016), the annual meeting in Bosnia-Herzegovina and the Indian Society of Nephrology congress (December 2016).

**INNOVATIVE ONLINE TRAINING IN NEPHROPATHOLOGY**

The year-long web-based Clinical Nephropathology Certificate program (CNC) developed by the ISN-ANIO India Committee (American Nephrologists of Indian Origin) included a successful mixture of pre-recorded lectures, live webinars, and formative assessments for nephrologists and pathologists worldwide. Until 2016, 560 participants from around the world took part in the program.
The Scientific Writing Academy is the ideal opportunity to work together and share knowledge and experience.

Participants at the Scientific Writing Academy in Italy.

The 2016 edition of the workshop proved as interactive and engaging as ever.

Bringing together participants from different backgrounds is what makes these workshops stand out.

Our Dedicated School of Writing

With support from Fondazione della Comunità Bergamasca, Fluorseals SPA, and the ISN, the scientific writing academy welcomed over 20 students in 2015 and 2016, from all corners of the world. Spelling out the importance of swapping knowledge and experience to fine-tune manuscript writing skills.

The 2015 edition was organized at Villa Camozzi in Northern Italy and was led by Professor David Warnock from the University of Alabama, USA. In September 2016, it was the turn of Martin de Borst, Associate Professor of Medicine at the University of Groningen in the Netherlands to pass on his writing experience and share valuable advice on submitting grant proposals.

At the end of this one-week course, participants are equipped to plan and outline papers in an organized and systematic way, incorporating their colleagues’ suggestions and observations. Achieving and maintaining high standards in scientific writing is crucial to advancing research as much as sharing, testing and comparing new ideas and discoveries.

Small and interactive, these groups gather a wide range of nationalities and scientific backgrounds with nephrology as a meeting point. Participants have come from Argentina, Rwanda, Vietnam, Hungary, Canada, Senegal, Thailand, Mexico, Bosnia, Italy, Spain, and India, with tutors from the Netherlands and the United States.

For one participant, the most relevant feature was interacting with a diverse background of participants. Everybody had a slightly different perspective, leading to interesting and relevant discussions.

Student Davide G. Franchina, says: ‘Since I am applying for PhD programs, this course perfectly met my needs. It gave me a good foundation for writing in science.’

To come full circle, students will share their experiences with colleagues in the hope of communicating findings even more effectively, continuing to move science forward, one paper at a time.
THE NEXT LEVEL OF EDUCATION

Aside from reinforcing the quality of our longstanding medical journals, we have dedicated time, funds and expertise to developing a new and interactive learning platform so everybody has equal access to the best knowledge within the field of nephrology.

ISN Academy encourages nephrologists to get out of the classroom and access a wide range of educational resources where and when they need it. User-friendly and interactive, the dashboard also empowers learners to track their progress and study at their own pace.

Following in the footsteps of ISN Education, the ISN Academy was launched early 2017. This innovative online e-learning platform is an extensive mix of presentations, guidelines, cases and articles, with over 1,600 pieces of content, 18 topics and 40 webinars. It is also the main entry point to read Kidney International, ISN’s flagship journal.

Get learning on: www.theisn.org/academy or download the app.

ISN ACADEMY CONTENT

- AUDIOVISUAL PRESENTATIONS: 48%
- POWERPOINT PRESENTATIONS: 17%
- WEBINARS: 3%
- E-LEARNING MODULES: 2%
- GUIDELINES: 2%
- IMAGES & CASES: 5%
- ARTICLES: 22%
- BOOKS: 1%
A NEW ERA FOR PUBLISHING KIDNEY INTERNATIONAL

In January 2016, Elsevier, the world-leading provider of scientific, technical and medical information products and services, took over the publication of Kidney International (KI) from Nature Publishing.

KI serves as ISN’s primary journal for disseminating original research in basic science and clinical medicine to our members and readers worldwide. This change provided us with more resources to further expand our mission. It also allowed us to dedicate more funds to increase our presence and ability in advancing equitable and ethical kidney care through tailored advocacy, education and research.

ISN members now receive an augmented and improved version of KI, KI Supplements, as well as KI Reports. KI Reports, our online journal publishing a broad range of articles encompassing clinical and translation research, was launched in 2016. ISN members who want to publish in the open access KI Reports can do so at a reduced rate.

KI also includes a new section titled Nephrology Digest, which presents summaries and comments on recently published basic science and clinical investigations of interest to the journal’s global readership.

Kidney International’s premier position amongst journals focused on the development and consequences of kidney disease will be strengthened through the association with Elsevier.

David Harris, ISN President 2017-2019
ISN events connect doctors, nurses and professionals from related medical fields, giving them plenty of food for thought as well as the necessary knowledge and support to help reduce the impact of kidney disease worldwide.

**WCN 2015: A worldwide celebration of nephrology**

It was with a warm and joyful sense of humor that Archbishop Desmond Tutu welcomed participants to South Africa. “Is there a doctor in the house?” he asked as he praised ISN for its efforts in bringing all medical communities together to fight kidney disease and breaking down barriers to achieve better care for patients everywhere.

Two years in the making, the ISN World Congress of Nephrology 2015 (WCN) welcomed 3,578 participants, representing 124 countries. It was the first time the meeting took place in Africa. A fitting choice, the theme of sustainability and diversity was present in all discussions. Almost 200 expert speakers participated in a ground-breaking program. Just over 1,500 abstracts were accepted for poster presentations and moderators were on hand to discuss 65 oral poster presentations.

This meeting was a chance to exchange knowledge with nephrology communities worldwide. ISN awards were handed to those who are changing nephrology. ISN Programs awards recognized participants for their dedication to improve kidney research and care in developing regions, by working with doctors and centers in the developed world. A poster session, supported by the Japanese Society of Nephrology, showcased this success.

**At the forefront of knowledge**

October 2015, saw the first ISN Forefronts Symposium take place in Shenzhen, China. Nephrologists, cardiovascular and renal physiologists, and immunologists gathered to review, update, and exchange current knowledge and ideas on the pathophysiology of hypertension, vascular injury, and immune regulation. The following 2016 edition was held in sunny San Diego and focused on the link between the metabolome, microbiome and kidney disease.

In April 2016, more than 200 delegates came together in Berlin for the ISN Nexus Symposium. They discussed the translational problems of trial design and market development in the field of nephrology.

Despite enormous research efforts done by the basic science kidney research community, only few drug targets have been successfully validated and developed into innovative drugs for patients. This was the first ISN Nexus meeting on immune-mediated kidney diseases.

Introduced in 2006, ISN Nexus Symposia bridge the gap between basic research and clinical practice by offering a profound focus on translational medicine and clinical application. ISN Forefronts Symposia have played an important educational role for nephrologists since 1984 by offering a specific focus on emerging and ground-breaking research.

Now these two meetings will merge into one format called ISN Frontiers meetings. The first ISN Frontiers meeting will take place in Tokyo, Japan from February 22 to 25, 2018 and will center around the theme of kidney disease and cardiovascular disease.

ISN Frontiers meetings build on the success and achievements of the ISN Nexus and Forefronts series, bringing together basic scientists, clinicians and practitioners in a unique setting. This new event format will make more cutting-edge science available to a global audience, breaking down cross-regional barriers in accessing the latest knowledge and expertise.
BROADENING HORIZONS FOR OUR INVESTIGATORS

By mentoring researchers in emerging countries, the ISN Clinical Research Program now also funds projects in specific areas of intervention and ultimately closing the gaps in kidney care thanks to the development of more nephrology research globally.

Improving research should lead to better patient care. It is particularly the case in low-and-middle-income nations where mentorship, infrastructure and funds for research differ. The Clinical Research Program strives to make today’s research more sustainable and train independent investigators who can then become leaders in their regions.

Thanks to success stories in Mongolia, Nepal and China, lots of data now exist. Funding also continues to be awarded to projects focusing on acute kidney injury. ‘We now want to look at the effect of the burden of kidney disease, point to the need for intervention and close gaps in care regionally,’ explains ISN Clinical Research Program Chair Marcello Tonelli.

Mentoring also plays a particularly strong role in the careers of young investigators. The ISN-ANIO India Committee offers specific training for nephrologists from India. The ISN Young Nephrologists Committee’s mentorship program creates a sustainable advisory network.

UNDERSTANDING THE CKD AND OBESITY LINK IN CHINA

‘Due to the great social and economic contribution of the project to public health, a Provincial Key Laboratory of Metabolic Diseases was founded in Southern Medical University Affiliated Hospital, Guangzhou, China’ says Hequn Zou leading the project.

BALKAN ENDEMIC NEPHROPATHY

Members from the Society of Nephrology, Dialysis and Transplantation in Bosnia and Herzegovina organized screenings in Bosanska Posavina. They considered Balkan endemic nephropathy, a chronic tubulointerstitial nephropathy diagnosed in a few agrarian regions of the Balkans.
In 2015, the ISN Hydration for Kidney Health (H4KH), in partnership with Danone Nutricia Research, called for candidates from all disciplines relevant to kidney disease with an interest in hydration for kidney health to apply for one or two research grants.

The winners of these grants were announced during 2016. Sofia Enhörning, from Skåne University Hospital in Malmö, Sweden who received the Hydration and Kidney Health Grant, explains: ‘My research focuses on the relationship between an overactive vasopressin system, its disadvantageous effects, and the possible benefits from increased water intake by lowering circulating vasopressin/copeptin levels. The H4KH grant will be a cornerstone in the next two years funding of this research.’

Fabiana Nerbass, from the Fundação Pró-Rim in Joinville, Brazil was awarded the New Investigator Grant for her project on kidney health in Brazilian industrial workers exposed to heat, stress and dehydration. She is confident that this grant will improve knowledge on the topic, strengthen ties with a very important science institution and provide expertise to keep investigating the relationship between hydration and kidney health in her country.

This initiative is a collaboration between ISN and Danone Nutricia Research to stimulate the interest of established and new researchers to explore the role of hydration in kidney health. The New Investigator Grant is worth US$ 70,000 over two years and the Hydration and Kidney Health Grant offers US$ 50,000, also over two years.
STRENGTHENING KIDNEY RESEARCH CAPACITY

Adding to ISN’s growing research portfolio, the ISN iNET-CKD (Chronic Kidney Disease) network and the ISN-ACT (Advancing Clinical Trials) initiative show the real-time benefits of bringing researchers together to set up collaborative studies.

Officially established within ISN in 2016, ISN iNET-CKD is an international network made up of existing, independently-funded CKD cohort studies as well as current ISN members. Its counterpart, the ISN-ACT brings together people undertaking clinical trials and related studies in nephrology to facilitate interaction, share experiences and collaborate.

‘These relations promote the efficiency of sharing and transmitting experiences and research methods,’ says ISN iNET-CKD Chair Harold Feldman about creating this network.

BUILDING UP RESEARCH SKILLS IN EAST AFRICA

In a country with a critical shortage of care workers, ISN Educational Ambassadors Vanesa Bijol and Marla McKnight are working with doctors in Rwanda’s hospitals teaching the theory and hands-on skills to build a renal pathology program so clinical care and research efforts can develop sustainably.

These are vital steps towards establishing earlier and more precise diagnoses for patients with chronic kidney disease, providing adequate care for post-transplant recipients and targeting national prevention efforts.

ISN-ANIO INDIKUKA IPCOWALA ADVANCED APPRENTICESHIP PROGRAM

Priyanka Koshy, a young pathologist working at Madras Medical Mission Hospital in Chennai, India, trained for a month with Prof. Agnes Fogo at Vanderbilt University Medical Center. Recommending this program to other doctors, she believes that this apprenticeship allows those involved to approach the diagnostics and prognostics of kidney disease from a larger perspective.

Hands-on training courses are supporting India’s renal pathologists like Priyanka Koshy (far right), pictured with colleagues at Vanderbilt.
ISN - ADVANCING WITH THE TIMES

We have achieved an enormous amount in the last two years, despite uncertain times and global challenges. It has been an incredible privilege to be at the helm of this great global organization. Given the pace of external change, I am determined to continue to modernize our services and structures and work in partnership with our many affiliated organizations to ensure the ISN’s future relevance.

Looking back over 2015 and 2016 there has been an impressive achievement of major targets. We delivered ISN’s first-ever World Congress in Africa and had a lot of feedback from attendees about their wonderful experience in Cape Town.

We have managed to start many new initiatives, including the ISN CKD Closing the Gaps initiative and all research programs, and boosted our advocacy activities on time and within budget. We worked hard on further improving our very successful online education portal, so it can serve our members even better by seamlessly connecting with Kidney International and associate journals as well as our events and programs for emerging regions.

Our new meetings strategy, crafted while keeping in mind the incredible opportunities offered by new technology, will ensure the World Congress and other ISN meetings will remain a very attractive place for nephrologists, from every country, to learn, network and share tailored education.

None of this would have been possible without the dedication and professionalism of our staff, whose diverse achievements in close collaboration with very committed volunteer leaders are highlighted in this report.

Our staff are strongly committed to the ISN and have a clear sense of how their own work contributes to the Society’s overall success. I am confident that their commitment, coupled with our solid portfolio of activities, which appeal to every world region, will ensure the ISN remains a world-class organization providing widespread leadership and support for affordable, high-quality and ethical kidney care for every patient.

<table>
<thead>
<tr>
<th>Year</th>
<th>Membership Revenue</th>
<th>Publications Revenue</th>
<th>Revenue from Events</th>
<th>Other Revenue</th>
<th>Total Revenue</th>
<th>Investment in ISN Programs***</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>$1,246,000</td>
<td>$2,445,000</td>
<td>$3,466,000*</td>
<td>$8,743,000**</td>
<td>$15,900,000**</td>
<td>$1,434,000</td>
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<tr>
<td>2016</td>
<td>$1,160,000</td>
<td>$3,050,000</td>
<td>$402,000</td>
<td>$1,188,000</td>
<td>$5,800,000</td>
<td>$1,800,000</td>
</tr>
</tbody>
</table>

* Including WCN 2015
** The 2015 Revenue total includes a one-off publication income.
*** The investment in ISN Programs does not include investments to the 0by25 and Saving Young Lives Initiatives.

In the past two years, ISN continued on the path of consolidating its finances and securing diverse and innovative revenue sources. As revenue from congresses declines for all medical societies, ISN is glad to report that our World Congress and other meetings will be redesigned according to a completely new strategy finalized in 2016. This will ensure their continued contribution to ISN revenue in the coming years. Worth noting in 2015 revenue as reported above is the spike in Publications Revenue, due to the new contract signed with Elsevier. Events Revenue is considerably higher in 2015 (due to WCN taking place), whilst only smaller meetings took place in 2016. Membership Revenue is flat, although the total number of members slightly increased in 2016: this is due to ISN introducing free membership for all young doctors still in training. Overall, 2015 and 2016 have seen ISN still in a very solid position, despite challenging conditions in the worldwide economy.
REFLECTIONS ON THE ISN PRESIDENCY 2015-2017

It has been a privilege to be the President of the ISN over the last two years. As an organization, we strive for equitable access to care, education and research for all. Since 2015, we have built up ISN’s infrastructure and activities to really ‘close the gaps’ in these areas for individuals worldwide.

Building on the ISN 0by25 initiative, which focuses on Acute Kidney Injury (AKI) and improving preventable deaths from AKI, we complemented that set of activities with the ISN CKD Closing the Gaps initiative, similarly setting out to ensure access to the appropriate resources to optimize the outcomes for chronic kidney disease patients.

We initiated a first-ever international Summit on global kidney health to define a roadmap for ongoing care, research and policy activities. Also, the first ISN Global Kidney Policy Forum promoted discussion amongst policy makers and professionals regionally and internationally. We launched the first Global Kidney Health Atlas, a robust survey, which covers 93% of the worlds’ countries and documents their ability to deliver kidney care along the six domains of universal care.

This presidency has seen us heavily involved in World Health Organization (WHO) initiatives. We were asked to facilitate efforts related to the issues surrounding Chronic Kidney Disease of undetermined origin (CKDu), both generally and in Sri Lanka.

Most importantly, I believe that through the efforts of so many ISN members and the outstanding team at the ISN headquarters, we have taught, influenced, visited, advocated with and for hundreds and thousands of nephrologists and patients worldwide.

The ISN is an evolving organization and I am proud to be part of that evolution. The ISN Education portal has morphed into the ISN Academy. The ISN Programs have matured and grown. There are new efforts in clinical research with ISN-ACT and iNET-CKD led by passionate individuals, with committed team members from around the world. I hope to continue to participate in some of these in the future.

I have learned from all of you, shared your challenges, visited your facilities, your countries, and in some cases, your homes: those experiences have enriched my world tremendously.

Thank you for your collegiality and friendship over these last two years, and to all the members of the ISN, for your enthusiastic support in this journey.
ISN Executive Committee 2015-2017
Mona Nasir Al Rukhaimi (UAE) - Representative of the Council
Kai-Uwe Eckardt (Germany) - Presidential Appointee
John Feehally (UK) - Programs Chair
David Harris (Australia) - President-Elect
Robyn Langham (Australia) - Secretary General
Adeera Levin (Canada) - President
Zhi-Hong Liu (China) - Representative of the Council
Masaomi Nangaku (Japan) - Presidential Appointee
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Stuart Shankland (USA) - Treasurer

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- Mentorship Program Committee - Marcello Tonelli (Canada)
- Scientific Writing Academy - Marcello Tonelli (Canada)
- CME Program Committee - Fredric Finkelstein (USA)
- Core Programs Committee - John Feehally (UK)
- Education Ambassadors Program Committee - Vivekanand Jha (India)
- Fellowship Program Committee - Allison Eddy (Canada)
- Sister Renal Centers Program Committee - Paul Harden (UK)

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- Kidney Health in Disadvantaged Populations Committee - Guillermo Garcia Garcia (Mexico)
- Renal Pathology Advisory Committee - Agnes Fogo (USA)
- Young Nephrologists Committee - Rolando Claure-Del Granado (Bolivia)

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- Global Education Committee - David Harris (Australia)
- Education Committee - Vivekanand Jha (India)
- Meetings Committee - Carol Pollock (Australia)
- Publications Committee - Bertram Kasiske (USA)
- WCN2017 Scientific Program Committee - Kai-Uwe Eckardt (Germany)
- WCN2017 Congress Organizing Committee - Adeera Levin (Canada)
- WCN2017 Local Organizing Committee - Ricardo Correa Rotter (Mexico)

ISN Research
- Global Research Committee - Marcello Tonelli (Canada)
- ISN-ACT - Vlado Perkovic (Australia)
- INET-CKD - Harold Feldman (USA)
- H4KH Research Initiative - Louise Moet (Canada)
- Global Kidney Health Atlas - David Johnson (Australia), Aminu Bello (Canada)

ISN AKI Initiatives
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- Saving Young Lives - John Feehally (UK)

ISN Portfolios
- Global Advocacy – Robyn Langham (Australia)
- Global Education – David Harris (Australia)
- Global Research – Marcello Tonelli (Canada)

Other ISN Activities
- Awards Committee - Adeera Levin (Canada)
- Declaration on Organ Trafficking and Transplant Tourism - Beatriz Dominguez-Gil (Spain), Elmi Muller (South Africa)
- ISN-ANIO India Committee - John Feehally (UK), Aijay Singh (USA)
- Nominating Committee - Agnes Fogo (USA)
- Renal Disaster Relief Task Force - Wim Van Biesen (Belgium)
- World Kidney Day Steering Committee - Philip Li (Hong Kong), Guillermo Garcia Garcia (Mexico)
LEADING THROUGH COLLABORATION AND ALLIANCES

**Africa**
- African Association of Nephrology (AFRAN)
- Egyptian Society of Nephrology & Transplantation
- Kenya Renal Association
- Moroccan Society of Nephrology
- Nephrology Society of Tanzania
- Nigerian Association of Nephrology
- Senegalese Society of Nephrology
- South African Renal Society (SARS)
- Sudanese Nephrology Society (SNS)
- Tunisian Society of Nephrology

**Asia**
- Arab Society of Nephrology & Renal Transplantation
- Asian Pacific Society of Nephrology (APSN)
- Australian & New Zealand Society of Nephrology (ANZSN)
- Bangladesh Renal Association
- Chinese Society of Nephrology
- Dialysis, Nephrology and Kidney Transplantation Union of Georgia
- Emirates Medical Association Nephrology Society (EMAN)
- Hong Kong Society of Nephrology (HKSN)
- Indian Society of Nephrology
- Indonesian Society of Nephrology (Ina SN)
- Iranian Society of Nephrology
- Iraqi Society of Nephrology
- Israeli Society of Nephrology & Hypertension
- Japanese Society of Nephrology (JSN)
- Jordan Society of Nephrology and Renal Transplantation
- Korean Society of Nephrology
- Kuwait Nephrology Association
- Lebanese Society of Nephrology & Hypertension
- Malaysian Society of Nephrology
- Mongolian Society of Nephrology and Urology
- Myanmar NephroUro Society
- Pakistan Society of Nephrology and Urology
- Philippine Society of Nephrology
- Russian Dialysis Society
- Saudi Society of Nephrology & Transplantation
- Singapore Society of Nephrology
- Society of Nephrologists, Dialysis and Transplant Physicians of Kazakhstan
- Syrian Society of Nephrology & Transplantation
- Taiwan Society of Nephrology
- The Nephrology Society of Thailand
- Turkish Society of Nephrology
- Yemen Society for Nephrology and Transplantation

**Europe**
- Albanian Society of Nephrology
- Association for nephrology, dialysis and transplantation of Bosnia and Herzegovina
- Austrian Society of Nephrology
- Belgian Society of Nephrology
- British Association of Paediatric Nephrology
- Bulgarian Society of Nephrology
- Croatian Society of Nephrology, Dialysis & Transplantation
- Danish Society of Nephrology
- Dutch Federation of Nephrology (NFN)
- Estonian Society of Nephrology
- French Society of Nephrology, Dialysis and Transplantation (SFNDT)
- German Society of Nephrology
- Hellenic Society of Nephrology
- Hungarian Society of Nephrology
- Irish Kidney Association
- Irish Nephrology Society
- Italian Society of Nephrology
- Latvian Association of Nephrology
- Macedonian Soc. of Nephrology, Dialysis, Transplantation and artificial Organs
- Moldavian Society of Nephrology
- Montenegrin Association of Nephrologists
- Norwegian Society of Nephrology
- Polish Society of Nephrology
- Portuguese Society of Nephrology
- Renal Association
- Romanian Society of Nephrology
- Serbian Cardiorenephrology Association (KARNEF)
- Slovenian Society of Nephrology
- Spanish Society of Nephrology/Fundación Senefero
- Swedish Society of Nephrology
- Swiss Society of Nephrology

**North America**
- American Society of Nephrology (ASN)
- Association of Nephropathy and Hypertension of El Salvador
- Canadian Society of Nephrology Health Sciences Centre (CSN)
- Costa Rican Society of Nephrology
- Cuban Society of Nephrology
- Guatemalan Society of Nephrology
- Latin American Society of Nephrology and Hypertension/SLANH
- Mexican College of Nephrologists
- Mexican Institute for Kidney Research
- Panamanian Society of Nephrology
- Puerto Rico Society of Nephrology and Hypertension

**South America**
- Argentine Society of Nephrology
- Bolivian Society of Nephrology
- Brazilian Society of Nephrology
- Chilean Society of Nephrology
- Colombian Society of Nephrology
- Ecuadorian Society of Nephrology (SEN)
- Paraguayan Society of Nephrology
- Peruvian Society of Nephrology
- Uruguayan Society of Nephrology
- Venezuelan Society of Nephrology

We collaborate with 94 national and regional nephrology societies as well as several other organizations in the field.

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- Fresenius Medical Care
- Roche
- SANOFI RENAL
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- Asian Pacific Society of Nephrology (APSN)
- Astute Medical
- Australian and New Zealand Society of Nephrology (ANZSN)
- Baxter - UHN ExpLoRe Home Dialysis
- Cross Regional Education And Exchange In Dialysis (CREED) Program Elsevier
- Heartlands Hospital
- Hong Kong Society of Nephrology (HKSN)
- Indian Society of Nephrology (ISN-India)
- International Pediatric Nephrology Association (IPNA)
- Japanese Society of Nephrology (JSN)
- Kidneys for Life
- Kidney Research UK
- Roche
- Sociedad Latinoamericana de Nefrologia e Hipertension (SLANH)
- The Transplantation Society (TTS)
- The Renal Association

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- American Society of Nephrology (ASN)
- Cochrane-Renal.org
- Dialysis Outcomes and Practice Patterns Study (DOPPS) Program
- European Renal Association - European Dialysis and Transplant Association (ERA-EDTA)
- International Society for Peritoneal Dialysis (ISPD)
- Kidney Disease Improving Global Outcomes (KDIGO)
- The Lancet
- World Health Organization (WHO)