First report of the working group
Paris, 24 May 2012

B. Canaud, PJ. Blankestijn
Welcome and thanks

• Welcome to the first report of our working group on online hemodiafiltration
• Thanks to the experts who have accepted to take time and contribute by their expertise to upgrade our knowledge and improve care of dialysis patients
• Thanks to the ERA-EDTA council for supporting and funding this initiative
Some clarification statements

- EUDIAL is an open and flexible working group dedicated to promote innovation, quality and safety in renal replacement therapies
- EUDIAL is focused on improving outcome of dialysis patients
- EUDIAL has been created on the initiative of some ERA-EDTA members.
- EUDIAL is supported by the council and needs to report at the ERA-EDTA
- EUDIAL offers an unique opportunity to all those interested in improving the outcomes of dialysis by reaching a consensus on the initial topic on convective therapies
Rationale for starting our activity by online HDF therapies

• Increasing scientific interest for convective renal replacement therapies particularly the online hemodiafiltration
• European nephrology community has been leading this field of renal replacement therapy for more than two decades.
  • Ultrapure dialysis fluid has been accepted as new standard
  • European notified bodies certified machines for online production of substitution fluid.
• Highest prevalence of CKD patients treated by convective renal replacement therapies is found in Europe
• First randomized controlled trials comparing outcomes of CKD patients have been conducted in Europe
• Several preliminary reports suggest an improvement in outcomes for CKD patient treated by these modalities
How we proceeded after the Prague meeting?

- We collected from the website the list of ERA-EDTA members that manifested interest in the EUDIAL activity (≈280)
- Among them we identified those who were interested to contribute (actively) from those who intended to be informed (passively).
- Among identified active members we selected those who expressed their interest for a specific topic on the basis “first answer first serve” (30)
- Based on selection we established the list of members by subgroup
Group composition

- Groups consist of experts who expressed an interest and include academics, clinicians and industry scientists.
- Manufacturers of online equipment have been invited to send observers.
Workshop meeting in Paris

• The first workshop of the Eudial WG was held in Paris on October 12th, 2012
• It was followed by a combined meeting with KDIGO on novel technologies in dialysis held in Paris on October 13-14th, 2012
Workshop meeting in more details

• Make an inventory of online HDF therapies focusing on 4 main topics
• Share the information within the entire group
• Establish a list of questions to be answered
• Provide and/or collect information and documents (scientific, regulatory...)
• Plan the list of actions by subgroup
• Organize intermediary meeting or teleconference by subgroup
• Prepare consensus manuscripts for NDT
Organization of the working day

Plenary session

Breakout Sessions

Group 1: Definitions and quantification
Group 2: Safety standards, regulations and guidelines
Group 3: Short term and long term effects and outcome
Group 4: Evidence based and educational issues

Plenary session
Report of groups

Summary
Plan for future activity
Four topics – Four groups

• Group 1: Definitions and quantification
• Group 2: Safety standards, regulations and guidelines
• Group 3: Short term and long term effects and outcome
• Group 4: Evidence based and educational issues
Group 1: Definitions and quantification

- Tattersall James*, Leeds-UK
- Davenport Andrew, London-UK
- Hegbrant Jörgen, Lund-Sweden
- Kircelli Fatih, Izmir-Turkey
- Ledebo Ingrid, Lund-Sweden
- Maduell Francisco, Barcelona-Spain
- Port Friedrich, Ann Harbor, MI, USA
- Santoro Antonio, Bologna-Italy

* “Group starter” introduction, rationale and discussant
Task for Group 1: Definitions and Quantification

• Blood purification by hemodiafiltration (HDF) should be defined, making it possible to differentiate this therapy from high-flux hemodialysis (hfHD) and hemofiltration (HF)
• The definition should consider different techniques utilized to achieve excessive ultrafiltration and fluid replacement with regard to fluid preparation, quality and administration, and control of the convection volume
• A clinically relevant quantification of HDF therapy should be proposed
Group 2: Safety standards, regulations and guidelines

• Canaud Bernard*, Montpellier-France
• Ward Richard*, Louisville-USA
• Gura Victor, Los Angeles-USA
• Grooteman Muriel, Amsterdam-The Netherlands
• Krieter Detlef, Wuerzburg-Germany
• Ragon Alain, Marseille-France
• Schindler Ralf, Berlin-Germany
• Vanholder Raymond, Ghent-Belgium
• Polaschegg Hanz-Dietrich, Austria (excused)

* “Group starter” introduction, rationale and discussant
Overall task for group 2

- Safety rules for producing sterile fluids
- Ultrafilters for sterile filtration
- Electrical safety standards for online hemodiafiltration machines
- Hygienic handling of WTS and HDF machine
- Quality control process
Group 3: Short term and long term effects and outcome

- Blankestijn Peter*, Utrecht-Netherlands
- Covic Adrian, Iași, Romania
- Hoffmann Joerg, Frankfurt-Germany
- Kuhlmann Martin, Berlin-Germany
- Locatelli Francesco, Lecco-Italy
- Martin Malo Alejandro, Sevilla-Spain
- Ok Ercan, Izmir-Turkey

* “Group starter” introduction, rationale and discussant
Group 3: Short term and long effects and outcome.

- Overall task: to define short term and long term variables that determine efficacy and safety of HDF
Group 4: Evidence based and educational issues

- Nube Menso*, Amsterdam-Netherlands
- Bots Michiel, Utrecht, Netherlands
- Hothi Daljit, London-UK
- Hutchison Colin, London-UK
- Nicoud Philippe, Sallanches-France
- Pedrini Luciano, Milan-Italy
- Shroff Rukshana, London-UK

* “Group starter” introduction, rationale and discussant
Group 4: evidence based and educational issues.

• Overall task: to define the most important areas where evidence is needed and educational activities are needed
Where we are now?

• After the workshop, it has been decided to prepare two manuscripts summarizing work and thoughts of the four subgroups
  • The draft of the first manuscript on definition, quantification and safety standards is already done and circulating for amendment and approval
  • The draft of the second manuscript on evidence-based online HDF outcomes is on track
• It has also been planned to develop educational program for this year
What to do next for Eudial WG?

It is crucial and requested by ERA council to launch an educational program and create a network
• To facilitate the implementation of online HDF in centers not experienced with the method
• To disseminate safe and optimal ways of delivering high-efficient online HDF
• To share experience of online HDF within the ERA-EDTA community
• To contribute to science by reporting outcomes in HDF treated patients

Much more information will be provided by PJ Blankestijn
From my side?

• Due to a recent change in my professional and academic career, I will step down as chairman of this WG.

• Bylaw of our WG indicates that a chairperson needs to be chosen or elected from the board member.

• In the meantime PJ Blankestijn may act as chairman since he knows perfectly the mission of the WG and he was instrumental in launching this project.
Thank you all for your great and valuable input and I wish a long and fruitful life to EUDIAL
Questions and answers ?