



# NEWS

**European Renal Association -  
European Dialysis and Transplant Association**

## **CKJ has started a review series on CKD hotspots around the world: where, why and what lessons can be learned**

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Chronic kidney disease (CKD) is one of the three causes of death that has increased the most in the last 20 years. However, CKD is not distributed homogeneously. CKD hotspots are defined as countries, region, communities or ethnicities with higher than average incidence of CKD. The need for replacement of renal function by dialysis or transplantation is, for example, 2.0- to 3.0-fold higher in Greece, Belgium, Austria, Slovenia, France or Denmark than in the United Kingdom, Spain or Iceland. Are Greece, Belgium, Austria, Slovenia, France or Denmark CKD hotspots? And if so, why?

The Clinical Kidney Journal (CKJ) has launched a global quest for CKD hotspots in order to reverse a dramatic trend: In Europe lead from plumbing, herbal toxins in weight-losing regimens, toxin-contaminated crops or unhealthy dietary habits rich in rapidly absorbed carbohydrates have all been associated with CKD hotspots. In the United States, high fructose corn syrup-containing beverages and foods are suspected to be a contributing factor. However many hotspots and their causes remain unrecognized.

To define CKD hotspots and, thus, to identify risk factors are the aims of the review series, as the editors explain [1]. The first article [2] of this series deals with the high CKD incidence in Aborigines. Risk factors of this cohort reflect nutritional and developmental disadvantage, and inflammatory/infectious milieu.

[1] Catalina Martin-Cleary, Alberto Ortiz. CKD hotspots around the world: where, why and what the lessons are. A CKJ reviews series. CKJ 2014, epub ahead of print.

[2] Wendy E Hoy. Kidney Disease in Aboriginal Australians: a perspective from the Northern Territory, CKJ 2014, epub ahead of print.

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### About ERA-EDTA

With more than 7,000 members, the ERA-EDTA ("European Renal Association – European Dialysis and Transplant Association") is one of the biggest nephrology associations worldwide and one of the most important and prestigious European Medical Associations. It supports basic and clinical research in the fields of clinical nephrology, dialysis, renal transplantation and related subjects. The ERA-EDTA supports a number of studies as well as research groups and has founded a special "Fellowship Programme" for young investigators as well as grant programmes. In order to involve young nephrologists in all activities of the ERA-EDTA the Council decided to create a Young Nephrologists' Platform (YNP). Besides, it has established various research networks and different working groups to promote the collaboration of nephrologists with other medical disciplines (e.g. cardiology, immunology). Furthermore, a "European Renal Best Practice" (ERBP) advisory board has been established by the ERA-EDTA to draw up and publish guidelines and position statements. Another important goal of the ERA-EDTA is education: several series of CME-courses as well as the annual congress offer an attractive scientific programme to cover the need of continuous medical education for doctors working in the fields of nephrology, dialysis and transplantation. The association's journals, NDT (Nephrology, Dialysis, Transplantation) and CKJ (Clinical Kidney Journal), are currently the leading nephrology journals in Europe. The ERA-EDTA Registry is a large epidemiologic database comparing countries by assessing nephrology practice throughout Europe. Finally, ERA-EDTA is member of the European Kidney Health Alliance (EKHA), a consortium of renal societies that actively interacts with the European Parliament. For more information please visit [www.era-edta.org](http://www.era-edta.org)