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ERA-EDTA Council

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Invitation Leading European Nephrology

Dear Colleagues and Friends,

It is our great pleasure and privilege to invite you to London in May 2015 to take part in the 52nd congress of ERA-EDTA. The Society is planning a meeting of outstanding scientific interest and quality in the world-famous city of London.

The Congress is being held in partnership with the UK Renal Association and other international Societies and the Scientific Programme will benefit greatly from their contribution and collaboration.

The meeting will be held in the ExCeL Congress Centre to the East of London, not far from London City Airport, the Olympic Site and Canary Wharf. Hotels will be available locally and mostly within 20 minutes walking distance from the Congress Centre.

The scientific programme has been meticulously prepared and organised by the Scientific Committee. As ever, it will allow for major coverage of the main clinical areas of interest for practicing nephrologists, and it will also feature cutting-edge scientific discoveries. Translational research has as usual a prominent part in the programme, and special thought and attention has been paid to chronic kidney disease, geriatric nephrology, and other important clinical areas.

There will be an extended CME programme at the day of the welcome ceremony, as usual one of the jewels in the crown of ERA-EDTA Congresses, and within that programme there will be many presentations from the ERA-EDTA working groups. As always, the "late breaking clinical trial" session promises to be exciting and stimulating. The Young Nephrologists' Platform will also be prominent in the Congress programme. As last year, we also plan to continue collaboration with The Lancet.

The theme for the Congress is the River Thames itself. Evocatively once dubbed "Liquid History", the river has seen many of the most famous and memorable people and occasions over the last few centuries. The river wends its careful way from a rural setting right into and across one of the world's most famous and vibrant cities. Ebbing and flowing like our scientific knowledge-base, the river commands respect and admiration in equal measure. We hope that the river can symbolise constancy and change, as we face the implacable often obdurate challenges deriving from both acute and chronic kidney disease with unceasing optimism and vigour.

We are all really hoping you will find the city welcoming, the programme exciting, the company stimulating and the experience enriching.

We look forward very much to welcoming you to London in May 2015 for the 52nd ERA-EDTA Congress

Andrzej Wiecek

ERA-EDTA President

David Goldsmith

52nd Congress President

Ziad Massy

Chair of the Scientific Committee

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Scientific Committee

CONGRESS PRESIDENTS

David Goldsmith, *United Kingdom* Andrzej Wiecek, *Poland*

SCIENTIFIC COMMITTEE

Chair: Ziad Massy, France

Daniel Abramowicz, Belgium Adrian Covic, Romania Mario Cozzolino, Italy Benjamin Dekel, Israel Olivier Devuyst, Switzerland Danilo Fliser, Germany Denis Fouque, France Luc Frimat, France Colin Geddes, United Kingdom Loreto Gesualdo, Italy David Goldsmith, United Kingdom Bruce Hendry, *United Kingdom* Raymond Krediet, The Netherlands Bengt Lindholm, Sweden Heini Murer, Switzerland Alberto Ortiz, Spain Moin Saleem, United Kingdom Mehmet Sukru Sever, Turkey Vladimir Tesar, Czech Republic Raymond Vanholder, Belgium Bruno Watschinger, Austria David Wheeler, United Kingdom Andrzej Wiecek, Poland



Important Addresses

SCIENTIFIC PROGRAMME

Congress Presidents

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Chair of the Scientific Committee

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CONGRESS SECRETARIAT

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Registrations

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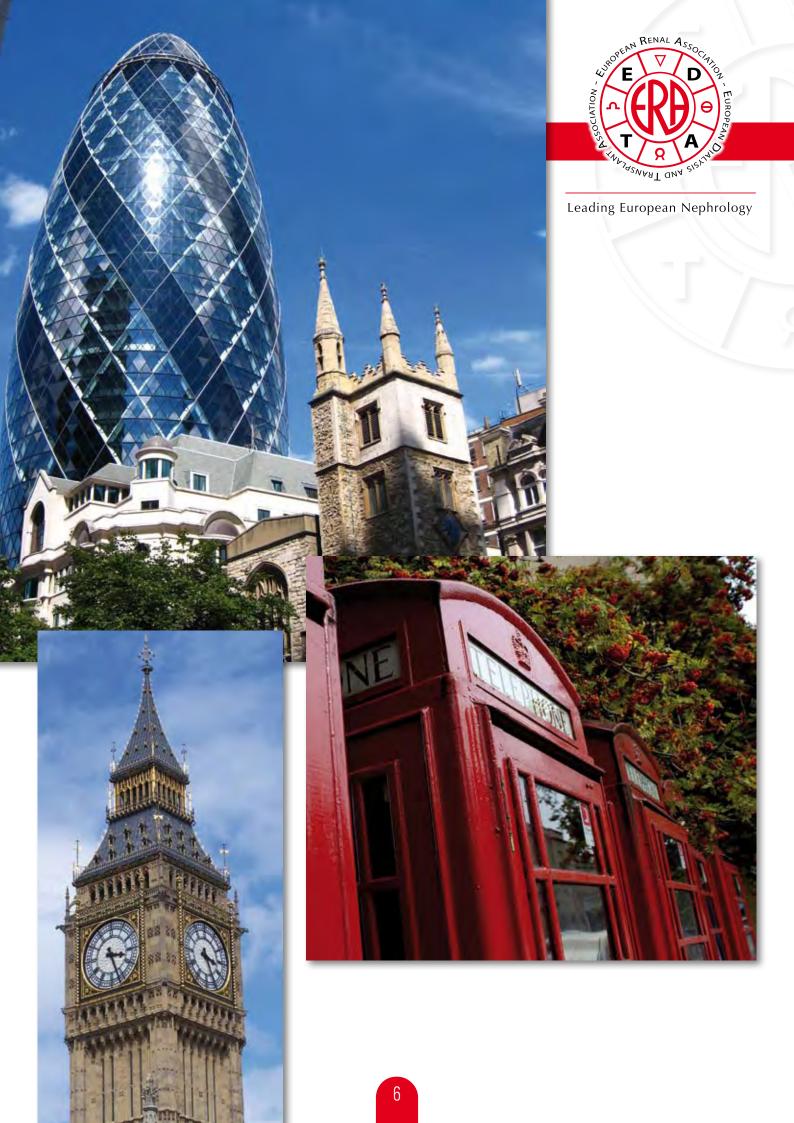
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Fluid and electrolytes, tubular transport, physiology
Hereditary disorders, development, pregnancy, paediatric nephrology
Glomerular diseases and general clinical nephrology
Acute kidney injury and intensive care nephrology
CKD - epidemiology, prevention, progression, pathophysiology, aging

Hypertension, diabetes, vascular disease
End stage renal disease, dialysis, PD
Transplantation

Congress Timetable

THURSDAY	MAY 28th, 2015									
9.00-12.15 12.15-13.15				Immune mediated renal diseases: news from the ERA-EDTA IWG	CME 5 - EUDIAL WG	CME 6 - DIABE WG DIABESI Diabetes, Obesin Renal Diseas	TY: ty and	CME 7 - EUTox WG Uremic toxicity: the compounds and how to clear them	CME WGIK updat Inherited Disor	(D An te on d Kidney
13.15-15.15	CME 9 - Euro 1 Basic clinic CME		CME 11 - ERBP	CME 12 - Cross- talk in Renal Epidemiology 13.15 - 16.15	CME 13 - NUTRITION WG Do renal diseases need a Nutrition working group?	on renal stone di a 360° appraisa series of case-b presentations or stone diseas	sease: al - A based renal	CME 15 - Exercise as medicine in CKD		
15.15-15.30 15.30-17.30	CME 16 - Euro 2 Advanced le clinical CME	vel questions in	CME 18 - The Lancet workshop		CME 19 - Imaging in nephrology	CME 20 - Geneti kidney disease f beginners				
	18.00 - 19.30 Welcome C	eremony		Exhibition		19.30	1 - 21.00	Welcome Recep	tion	
	AY 29th, 2015									
08.00-09.30	S 1 - Mechanisms and effects of renal remodelling and ageing	S 2 - Obesity and the kidney	3 - Everyday question he glomerulonephriti	ns from S 4 - ERA-ED s clinic	/ def	AKI: general concep inition / validation / implementation	rts FC		1 - Transl nysiology clinic	
09.30-10.45 10.45-11.30	PL 1 - Longevity and metabolism		Poster se	ssion, coffee break a	nd exhibition visit					
11.30-11.45 11.45-13.15	S 6 - LBCT	S 7 - CKD-MBD: update 2015	S 8 - New aspects odocyte diseases/po stress (in collaboratio the RPS Society	docyte treat AKI: Von with know? W	to avoid / Vhat do we hat do we	FC 3	FC 4	4 FC 5	S 10 - ND	ĴΤ
13.15-15.15 15.15-16.45	S 11 - Age dependent problems in transplantation	S 12 - The Lancet 1	S 13 - Diabetes, bloressure and kidney d	lisease (European Hypert	EDTA & ESH Society of ension)	F 6	FC :	7 FC 8	FC 9	
16.45-17.00 17.00-18.30	S 15 - ASN Highlights	S 16 - Aging kidney		offee break and exhib elderly S 18 - St traffic d	orage and	S 19 - SYSKID	FC 1	10 FC 11	FC 12	
08.00-09.30	Y, MAY 30 th , 2015 S 20 - HLA and non-HLA Antibodies — Avoid them or treat them?		? - B-cell targeted ment in glomerular disease	S 23 - Vascular calcification: what's new?	S 24 DOF	PS FC 13		MC 2 - Basic science translated from and to PD		
09.30-10.45	or trout thom.			ffee break and exhibi	ition visit			Hem and to 1 B	ERA-E	
	PL 2 - Transplantation: the past, present and the future								General A.	ssembij
11.30-11.45 11.45-13.15	S 25 - Uremic toxicities S	26 - The Lancet S 2	27 - Biomarkers	offee break and exhib S 28 - ISN Session: addressing the globa unmet needs for AK	S 29 - You al Nephrologists' (YNP)	ung FC 15 Platform	FC 16	FC 17		
13.15-15.15 15.15-16.45	S 30 - IgA nephropathy	satisfaction Urer	mic Syndrome - a plement disorder	Industry Sympo: 5 33 - ERA-EDTA & CS (Chinese Society of Nephrology)	SN S 34 - Lipopro CKD revis		FC 19	FC 20		
16.45-17.00 17.00-18.30	S 35 - New insights into phosphate handling by kidney, bone and vasculature		ERA-EDTA & JSN panese Society of	offee break and exhib S 38 - Viruses: transplantation in th light of new treatme options	FC 21	FC 22	FC 23	FC 24		
08.00-09.30	MAY 31st, 2015 S 39 - Novel therapeutic ap glomerular diseas	proaches in s 40 - A lation a	cid-base regu- and the kidney	S 41 - RRT and AKI	there new tr on th	se recurrence – are eatment strategies ne horizon?		3 ERA-EDTA & ESC propean Society of Cardiology)	FC 25	FC 26
09.30-09.45 09.45-10.30	PL 3 - Stem cells and plui mechanisms of reprogramm targeting in ES cells ar	ing and gene	C	offee break and exhil	bition visit					
10.30-10.45 10.45-12.15	S 44 - From kidney developm regeneration: deciphering de cues to engineer kid	ent to kidney s 45 - \ ciency ii		offee break and exhit - Inflammation in CK dialysis patients	D and S 47 - Chan	nels and transpor- w drug targets		FC 27	FC 28	FC 29
12.15-13.15 13.15-14.45	S 48 - Renovascular hyperter and whom to offer revascu			nch break and industr 50 - New osmotic age		FC 30		FC 31		
14.45-16.15	S 51 - Proteinuria: therapies angiotensin inhibit	beyond renin- S 52 -		53 - Hot ethical issue modern nephrology	paediatric ne	is new and hot in ephrology: report o ing Groups activity	f	FC 34	FC 35	FC 36



PLENARY LECTURES

- **Longevity and metabolism** Johan Auwerx, Lausanne, Switzerland
- Salt a health problem? Tilman Drueke. Amiens. France
- Stem cells and pluripotency: mechanisms of reprogramming and gene targeting in ES cells and mice George Daley, Cambridge, U.S.A.

MASTERCLASSES

In collaboration with EUROPD



- Translation of physiology to the clinic
 - PD drug dosing and pharmacokinetics in peritoneal dialysis: neglected but important

Jan T. Kielstein, Hannover, Germany

- Fluid management in PD: where is the fluid? **Jeroen Kooman**, Maastricht, The Netherlands
- Basic science translated from and to PD
 - What can nephrologists learn from fibrosis research in PD? Janusz Witowski, Poznan, Poland
 - What can nephrologists learn from inflammation and immunology research in PD?

Donald Fraser, Cardiff, United Kingdom

Endothelial glycocalix: a new target of research in PD and uraemia related cardiovascular disease?

Carmen Vlahu, Amsterdam, The Netherlands

MINI LECTURES

Live imaging of the kidney in health and disease Andrew Hall, Zurich, Switzerland

New players in mineral homeostasis René Bindels, Nijmegen, The Netherlands

Angiotensin and tubular salt handling Laszlo Rosivall, Budapest, Hungary

Renal oxygen sensing and EPO **Kai-Uwe Eckardt**, Erlangen, Germany

Insights into uric acid metabolism from GWAS **Anna Koettgen**, Freiburg, Germany

Genetic regulation of sodium and potassium transport through WNK kinases

Xavier Jeunemaitre, Paris, France

New insights on calcium disorders

Rajesh V. Thakker, Oxford, United Kingdom

Autosomal dominant polycystic kidney disease: new insights into treatment

Imed Helal, Tunis, Tunisia

The JAK /STAT pathway in renal diseases Jesus Egido, Madrid, Spain

Vascular and endothelial dysfunction in pre-eclampsia Kate Bramham, London, United Kingdom

Pulmonary-renal syndrome

Charles Pusey, London, United Kingdom

Peritoneal dialysis in the management of AKI: has it been ianored?

Daniela Ponce, Botucatu, Brazil

Oliguria as a marker of AKI

Wim Van Biesen, Ghent, Belgium

AKI as a side effect of cancer therapy Sylvie Rottey, Ghent, Belgium

Cross-fertilization between the ERA-EDTA registry and national registries

Benedicte Stengel, Villejuif, France

Where do all these CKD Stage 3 patients disappear and do not progress to CKD 4

Mustafa Arici, Ankara, Turkey

Diabetic nephropathy - from the registry to clinical management Ivan Rychlik, Prague, Czech Republic

History of the laboratory diagnosis of renal disease Athanasios Diamandopoulos, Patras, Greece

Immunization against high blood pressure - an update Tomasz Guzik, Glasgow, United Kingdom

Does renal denervation influence the progression on CKD? Con **Dagmara Hering**, Perth, Australia

Does renal denervation influence the progression on CKD? Pro Peter J. Blankestijn, Utrecht, The Netherlands

Protein-bound uremic toxins stimulate crosstalk between leukocytes and vessel wall

Anneleen Pletinck, Ghent, Belgium

Volume - Na - impedance Adrian Covic, Iasi, Romania

The relationship between endothelial dysfunction and cardiovascular disease in CKD

Mahmut Ilker Yilmaz, Ankara, Turkey

Sodium intake: what is right for people with CKD Johannes F.E. Mann, Munich, Germany

State of the art of the wearable artificial kidney Claudio Ronco, Vicenza, Italy

Klotho is a key player in cardiovascular risk during dialysis Denis Fouque, Lyon, France



Leading European Nephrology

Exercise on haemodialysis

Halima Resic, Sarajevo, Bosnia and Herzegovina

Needling strategies and management **Ramon Roca-Tey**, Barcelona, Spain

The inflamed uremic phenotype - a mediator of premature aging **Peter Stenvinkel**, Stockholm, Sweden

Important trials in transplantation in the last 12 months **Bruno Watschinger**, Vienna, Austria

Post transplantation diabetes mellitus – novel pathogenetic factors and therapeutic recommendations

Mads Hornum, Copenhagen, Denmark

SYMPOSIA

Special Symposia

ERA-EDTA Registry

- Why do girls with end-stage renal disease wait longer for transplantation than boys?

Julien Hogan, La Plaine Saint-Denis, France

- EURODOPPS

Fergus Caskey, Bristol, United Kingdom

Racial disparities in the access to and outcomes of paediatric RRT

Lidwien Tjaden, Amsterdam, The Netherlands

Trends in the epidemiology of renal replacement therapy
 Maria Pippias, Amsterdam, The Netherlands

Stage 4 CKD - first results of the EQUAL study
 Moniek Van De Luijtgaarden, Amsterdam, The Netherlands

Young Nephrologists' Platform (YNP) - Tomorrow's nephrology presented by the nephrologists of tomorrow

 Overview on past and future initiatives of the YNP Miklos Z. Molnar, Memphis, U.S.A.

Innate and adaptive immunity and the kidney: a pathfinder tale

Kathrin Eller, Graz, Austria

- The nephrologist of tomorrow - towards a kidney-omic future? **Francesco Pesce**, London, United Kingdom

 Emerging factors for predicting adverse outcomes in kidney transplantation: more pieces to the puzzle?
 Maarten Naesens, Leuven, Belgium

International Practices and Improved Dialysis Outcomes: The DOPPS Program

- The DOPPS program continues to grow - special highlights **Ron Pisoni**, Ann Arbor, U.S.A.

- EURODOPPS: First birthday

Kitty Jager, Amsterdam, The Netherlands

- KDopps: Improving outcomes in advanced CKD and the transition to dialysis

Werner Kleophas, Düsseldorf, Germany

 PDOPPS as a unique opportunity for ancillary research: plans for the UK PD catheter study
 Martin Wilkie, Sheffield, United Kingdom - Measuring the patient experience: a useful approach to improve dialysis care?

Hugh Rayner, Birmingham, United Kingdom Panel Discussion

SYSKID - Prognosis and therapy of diabetic nephropathy: one size does not fit them all

- The epidemiology of CKD in Europe: implications for healthcare policies

Kitty J. Jager, Amsterdam, The Netherlands

 Clinical utility of risk scores/biomarkers to predict progression and outcome in diabetic nephropathy
 Peter Rossing, Gentofte, Denmark

 Linking biomarkers to pathophysiology and treatment response: a systems biology approach

response: a systems biology approach

Bernd Mayer, Vienna, Austria

 Enrichment strategies in clinical trials - the road to personalized medicine in nephrology?
 Dick De Zeeuw, Groningen, The Netherlands

NDT Pearls and Polar Views

 Clinical science pearls in Nephrology Dialysis and Transplantation in 2013-2014

Carmine Zoccali, Reggio Calabria, Italy

NDT Polar Views ABPM for the diagnosis and the monitoring of hypertension in dialysis patients

- ABPM should be systematically applied in dialysis patients **Rajiv Agarwal**, Indianapolis, USA

 ABPM should be applied only when really needed to make diagnostic or therapeutic decisions

Alan Jardine, Glasgow, United Kingdom

ASN Highlights

- Acute Kidney Injury

Ravindra L. Mehta, San Diego, USA

- Hypertension

Aldo Peixoto, New Haven, USA

- General Nephrology/CKD **Michel Chonchol**, Denver, USA

ISN Session: addressing the global unmet needs for AKI

 Introduction: ISN AKI Oby25: a human rights case for nephrologists

Giuseppe Remuzzi, Bergamo, Italy

 The burden of AKI throughout the world: existing data Norbert Lameire, Ghent, Belgium

 The Global Snapshot: results of a groundbreaking study on AKI

Ravindra L. Mehta, San Diego, USA

 Strategies to avoid preventable deaths from AKI in low/ middle income countries

Andrew Lewington, Leeds, United Kingdom



What is new and hot in paediatric nephrology: report of ESPN Working Groups activity

 Adults and children with renal diseases: a common working area for ESPN and ERA-EDTA

Rosanna Coppo, Turin, Italy

 CKD mineral and bone disorder WG Dieter Haffner, Hannover, Germany

ESPN WG CAKUT/UTI/Bladder dysfunction: news and activities

Stefanie Weber, Essen, Germany

Idiopathic nephrotic syndrome WG
 Georges Deschenes, Paris, France

ERA-EDTA & ESH (European Society of Hypertension) Joint Symposium

- Multidisciplinary approach of adherence in hypertensive renal patients

Michel Burnier, Lausanne, Switzerland

 Ambulatory blood pressure monitoring – the neglected child in nephrology

Josep Redon, Valencia, Spain

 Bioimpedance-derived volume assessment for all hypertensives

David Goldsmith, London, United Kingdom

 Aldosterone blockade vs. dual renin-angiotensin blockade in patients with resistant hypertension
 Speaker to be confirmed

ERA-EDTA & ESC (European Society of Cardiology) Joint Symposium

Valvular heart disease in renal failure patients

Natural history of aortic stenosis in renal insufficiency patients

Raphael Rosenhek, Vienna, Austria

- TAVI procedure in renal insufficiency patients Speaker to be confirmed

Valvular calcification in CKD patients

Antonio Bellasi, Como, Italy

- The problem of anticoagulation in CKD patients with valvular disease

Jürgen Floege, Aachen, Germany

ERA-EDTA & JSN (Japanese Society of Nephrology) Joint Symposium

Past, present, future: continuous challenge against kidney disease

Seiichi Matsuo, Nagoya, Japan

Development of novel drugs targeting CKD: hypoxia, oxidative stress, and epigenetic

Masaomi Nangaku, Tokyo, Japan

Treatment practice in patients with CKD: results from the GCKD study

Kai-Uwe Eckardt, Erlangen, Germany

CKJ - translational research
 Alberto Ortiz, Madrid, Spain

ERA-EDTA & CSN (Chinese Society of Nephrology) Joint Symposium

- Diabetic nephropathy: a growing challenge in China **Chuan Ming Hao**, Shanghai, China

- Diabetic nephropathy in Europe

Carl-Erik Mogensen, Aarhus, Denmark

- Management of amyloidosis in China **Xiang Hua Huang**, Nanjing, China

 Amyloidosis in Europe Speaker to be confirmed

Hot ethical issues in modern nephrology

- When to stop or not to stop renal replacement: do ethic rules offer guidance?
- Ethical dilemmas in living kidney donation (psychical pressure; bribery)
- How chronic kidney diseases differ from other chronic diseases from ethical point of view?
- Ethics and economics of rare diseases

Late Breaking Clinical Trials

The Lancet

UK Best Abstracts

UK Renal Scientist Award



Track 1 Fluid and electrolytes, tubular transport, physiology

Acid-base regulation and the kidney

- Alkali therapy to slow down progression of CKD Thomas H. Hostetter, Cleveland, U.S.A.
- New insights into acid-base regulation and the kidney Dominique Eladari, Paris, France
- Pathophysiology and clinical diagnosis of distal renal tubular

Robert Unwin, London, United Kingdom

- The genetics of acid-base disorders
- Fiona Karet, Cambridge, United Kingdom

New insights into phosphate handling by kidney, bone and vasculature

- Renal handling of phosphate
 - Carsten Wagner, Zurich, Switzerland
- FGF23 regulation in bone and kidney Klaus Olgaard, Copenhagen, Denmark
- Bone and vasculature crosstalk in health and disease Gérard London, Fleury-Merogis, France
- The role of FGF23 and Klotho in CKD Justine Bacchetta, Bron, France

Channels and transporters: new drug targets

- Inhibition of SGLT glucose transporters
- Volker Vallon, San Diego, U.S.A.
- Calcium-sensing and regulation of tubular transport Pascal Houillier, Paris, France
- Targeting the vasopressin-aquaporin axis Peter Deen, Nijmegen, The Netherlands
- Targeting the water channel AQP1 Olivier Devuyst, Zurich, Switzerland

Mechanisms and effects of renal remodelling and ageing

- Glomerular epithelial cells in ageing and disease Marcus J. Moeller, Aachen, Germany
- Ion transport and epithelial remodelling in the renal distal tubule

Johannes Loffing, Zurich, Switzerland

The renin-angiotensin-aldosterone system and the ageing

Ariela Benigni, Bergamo, Italy

Epithelial-mesenchymal transition (EMT) in kidney fibrosis: fact or fantasy?

Alberto Ortiz, Madrid, Spain

Track 2 Hereditary disorders, development, pregnancy, paediatric nephrology

Storage and traffic disorders

- Overview of renal storage disorders Luca Rampoldi, Milan, Italy
- Cystinosis
- William Van't Hoff, London, United Kingdom
- New insights into lysosomal storage disorders Carmine Settembre, Naples, Italy
- Renal Fanconi syndromes
- Robert Kleta, London, United Kingdom

ADPKD

- ADPKD: emerging mechanisms in disease pathogenesis Albert Ong, Sheffield, United Kingdom
- ADPKD: clinical studies in China **Chang Lin Mei**, Shanghai, P.R. China ADPKD: the HALT studies
- - Arlene B. Chapman, Atlanta, U.S.A.
- Genetic testing in ADPKD: assessing clinical utility Richard N. Sandford, Cambridge, United Kingdom

From kidney development to kidney regeneration: deciphering developmental cues to engineer kidneys

- From human pluripotent stem cells to early nephron Kenji Osafune, Kyoto, Japan
- From pluripotent stem cells to early collecting system Juan Carlos Izpisua Belmonte, La Jolla, U.S.A.
- Utilization of human nephron stem cells to repair broken kidnevs

Benjamin Dekel, Ramat Gan, Israel

Renal progenitor cells: a strategy for kidney regeneration Paola Romagnani, Florence, Italy

Growth in pediatric kidney disease

Clinical and epidemiological aspects George S. Reusz, Budapest, Hungary

Growth as the best clinical endpoint to assess CKD-MBD in children?

Justine Bacchetta, Bron, France

- Bone and growth biomarkers in 2015 Dieter Häffner, Hannover, Germany
- Growth hormone therapy after two decades of practice Lesley Rees, London, United Kingdom

Haemolytic Uremic Syndrome - a complement disorder

- The role of complement in endothelial activation **Anna Richards**, Stevenage, United Kingdom
- Atypical HUS
- genetics and treatment

Tim Goodship, Newcastle Upon Tyne, United Kingdom

- The glomerular response to shigatoxin in the pathogenesis of

Moin Saleem, Bristol, United Kingdom

- From mutations in complement genes to clinical use of eculizumab

Véronique Frémeaux-Bacchi, Paris, France



Track 3 Glomerular diseases and general clinical nephrology

B-cell targeted treatment in glomerular disease

B-cell targeting in ANCA-associated vasculitis David Jayne, Cambridge, United Kingdom

B cell targeteting in lupus nephritis Liz Lightstone, London, United Kingdom

B cell targeting in membranous nephropathy Piero Ruggenenti, Bergamo, Italy

B cell targeting in minimal change disease and FSGS Annette Bruchfeld, Stockholm, Sweden

IgA nephropathy

Genetics studies of IgAN reveal links to mucosal pathogens Ali G. Gharavi, New York, U.S.A.

IIK Renal As

Modifiable and unmodifiable risk factors for progression of IgA nephropathy

Rosanna Coppo, Turin, Italy The role of micro-RNA in IgA nephropathy Francesco Paolo Schena, Bari, Italy

Formation of IgA deposits in Berger's disease: what we learned from animal models

Renato Monteiro, Paris, France

Everyday questions from the glomerulonephritis clinic

Managing thrombotic risk in nephrotic syndrome Vladimir Tesar, Prague, Czech Republic

Approach to the patient with HIV infection referred with proteinuria

Jeremy Levy, London, United Kingdom

Which patients with IgA nephropathy benefit from immunotherapy?

Jürgen Floege, Aachen, Germany

Which patients with diabetes and proteinuria need renal

Loreto Gesualdo, Bari, Italy

Novel therapeutic approaches in glomerular diseases

- Biomarker-guided personalized treatment of proteinuria Peter Mundel, Boston, U.S.A.
- Complement targeted therapies in glomerular diseases Giuseppe Remuzzi, Bergamo, Italy

Current management of lupus nephritis

Frédéric A. Houssiau, Brussels, Belgium

IL-17 as a therapeutic target in crescentic glomerulonephritis **Ulf Panzer**, Hamburg, Germany

New aspects of podocyte diseases/podocyte stress

The challenge and response of podocytes to glomerular hypertension

Nicole Endlich, Greifswald, Germany

The role of mechanical forces in podocyte injury Wilhelm Kriz, Mannheim, Germany

- Ischemic injury of podocyte as a cause of collapsing glomerulopathy

Surya V. Seshan, New York, U.S.A.

Molecular and genetic basis of inherited nephrotic syndrome Maddalena Gigante, Foggia, Italy

Track 4 Acute kidney injury and intensive care nephrology

AKI: general concepts / definition / validation / implementation

The health economic burden of AKI

Donal O'Donoghue, Salford, United Kingdom

- AKI detection and early intervention: the role of e-alerts Mark Devonald, Nottingham, United Kingdom
- AKI: a true risk or predictor of CKD?

Paul Stevens, Canterbury, United Kingdom

Novel treatments in AKI

Andrew Lewington, Leeds, United Kingdom

How to avoid / treat AKI: What do we know? What do we hope?

 Prevention of AKI, which fluid? Donal Reddan, Galway, Ireland

- Are there differences in the prevention of AKI between younger and older individuals?

Norbert H. Lameire, Ghent, Belgium

Mechanisms of repair after acute kidney injury Joseph V. Bonventre, Boston, U.S.A.

Biomarkers

Uremic toxin profile in AKI versus CKD: any therapeutic implications?

Raymond Vanholder, Ghent, Belgium

NGAL vs KIM-1 vs other biomarkers Orfeas Liangos, Coburg, Germany

The use of biomarkers in septic AKI Jill Vanmassenhove, Ghent, Belgium

RRT and AKI

- Intermittent haemodialysis and isolated ultrafiltration Christophe Vinsonneau, Melun, France
- Renal replacement therapy in the emerging world Valerie A. Luyckx, Zurich, Switzerland
- Individualing hemodialysate in various types of AKI Francesco Locatelli, Lecco, Italy
- Should indications be uniform to start RRT in all types of AKI? Mehmet Sukru Sever, Istanbul, Turkey



Leading European Nephrology

Track 5

CKD - epidemiology, prevention, progression, pathophysiology, aging

Patient satisfaction

Patient satisfaction: why and how measure it in dialysis patient?

Serge Briançon, Nancy, France

- An overview of instruments to measure satisfaction with care in patients on renal replacement therapy

Sabine Van Der Veer, Manchester, United Kingdom

- How to implement patient satisfaction in practice patterns evaluation?

Luc Frimat, Nancy, France

- Is patient satisfaction a concept that is acceptable in a developing country?

Fayçal Jarraya, Sfax, Tunisia

Aging kidney

- Is there a link between foetal programming and the aging kidney?

Kerstin Amann, Erlangen, Germany

- Estimating GFR in the elderly in 2014

Christophe Mariat, Saint-Étienne, France

 Age and association of kidney measures with mortality and end-stage kidney disease

Stein I. Hallan, San Diego, U.S.A.

 Impact of socioeconomic conditions on elderly CKD Andrzej Wiecek, Katowice, Poland

Proteinuria: therapies beyond renin-angiotensin inhibition

- Endothelin Receptor Antagonists to lower proteinuria: looking beyond RAAS intervention

Hiddo J Lambers Heerspink, Groningen, The Netherlands

Can we heal the actin cytoskeleton?

Mario Schiffer, Hannover, Germany

- T-type calcium channel inhibitors and proteinuria: a potential renal therapy

Bruce Hendry, London, United Kingdom

Insulin and podocytes

Richard Coward, Bristol, United Kingdom

Uremic toxicities

 Uremic toxins and cardiovascular outcomes Roberto Pecoits-Filho, Curitiba, Brazil

Uremic toxins and renal outcomes
 Griet Glorieux, Ghent, Belgium

- Uremic toxins and neurological outcomes **Jean-Marc Chillon**, Amiens, France

Uremic toxins and gut

Pieter Evenepoel, Leuven, Belgium

Track 6

Hypertension, diabetes, vascular disease

Diabetes, blood pressure and kidney disease

- Emerging molecular footprints of diabetic kidney injury **Tobias Huber**, Freiburg, Germany

 Divergent pathophysiology/clinical course of nephropathy in type 1 and type 2 diabetes

Paola Fioretto, Padua, Italy

 Albuminuria in diabetic patients: prognosis and management Michel Jadoul, Brussels, Belgium

New treatment options to retard progression in CKD patients with diabetes

Luigi Gnudi, London, United Kingdom

Lipoproteins in CKD revisited

Dyslipidaemia in CKD: a risk factor for CV disease and CKD progression?

David Wheeler, London, United Kingdom

Current guidelines and treatment strategies for dyslipidemia in CKD

Christoph Wanner, Würzburg, Germany

Modifications of HDL in chronic kidney disease and their clinical relevance

Marcus Saemann, Vienna, Austria

 Lipoproteins, immune system and vascular disease in CKD Thimoteus Speer, Homburg/Saar, Germany

Renovascular hypertension – when and whom to offer revascularisation?

Current diagnostic algorithms in patients with renal artery stenosis

Andrzej Januszewicz, Warsaw, Poland

 Life after ASTRAL and CORAL: where do we go now with renal revascularization for atherosclerotic renal artery stenosis?
 Philip A. Kalra, Salford, United Kingdom

Fibromuscular dysplasia - current epidemiology and treatment
 Pierre-François Plouin, Paris, France

 Cardiovascular complications in patients with renovascular hypertension

Roland E. Schmieder, Erlangen, Germany

Obesity and the kidney

- ORG (Obesity Related Glomerulopathy) - does it exist? **Esteban Porrini**, La Laguna, Spain

- State of the art in weight management **Hermann Toplak**, Graz, Austria

- Obesity-associated arterial hypertension **Jens Jordan**, Hanover, Germany

Renoprotection in obese patient
 Francesca Mallamaci, Reggio Calabria, Italy

Vitamin D deficiency in CKD patients

- Epidemiology of hypovitaminosis D in CKD patients **Michal Nowicki**, Lodz, Poland

 Hypovitaminosis D and cardiovascular disease in CKD Markus Ketteler, Coburg, Germany

- Vitamin D, FGF 23 and Klotho - an important triangle in CKD patients **Danilo Fliser**, Homburg/Saar, Germany

Treatment with vitamin D – to whom, what and when?
 David Goldsmith, London, United Kingdom



Track 7 End stage renal disease, dialysis, peritoneal dialysis

CKD-MBD: update 2015

New biomarkers in CKD-MBD

Marc Vervloet, Amsterdam, The Netherlands

The calcium-phosphate product and FGF23

Pablo Antonio Ureña Torres, Saint-Ouen, France

Phosphate binders: which next? Tilman Drueke, Amiens, France

Which Vitamin D in dialysis patients? Mario Cozzolino, Milan, Italy

Vascular calcification: what's new?

Mechanisms of vascular calcification in CKD-evidence for premature ageing?

Ziad Massy, Paris, France

The vitamin D system and the vasculature

Sandro Mazzaferro, Rome, Italy

Should we check for VC in all CKD patients?

Jordi Bover, Barcelona, Spain

Vitamin K: key vitamin in controlling vascular calcification in chronic kidney disease

Vincent Brandenburg, Aachen, Germany

Hypercoagulability in ESRD: Myth or reality?

Underlying causes

Jolanta Malyszko, Bialystok, Poland

Risk groups and anticoagulation

Jens Lutz, Mainz, Germany

Pulmonary embolism in chronic kidney disease: a lethal but overlooked disease

Gürbey Ocak, Utrecht, The Netherlands

Vascular access in patients with hypercoagulability Andrew Davenport, London, United Kingdom

Inflammation in CKD and dialysis patients

Monitoring inflammation in patients on dialysis: why, how, and what else?

Christian Combe, Bordeaux, France

Uremic toxins, inflammation and perturbation of glucose metabolism

Laetitia Koppe, Montreal, Canada

- Any relationship between systemic and peritoneal inflammation?

Sylvie Opatrná, Pilsen, Czech Republic

Is EMT of the mesothelium related to an inherent or acquired fast peritoneal transport status and ultrafiltration failure? Rafael Selgas, Madrid, Spain

Dialysis in the elderly

End-of-life and palliative care in the dialysis setting **Ken Farrington**, Stevenage, United Kingdom

Assessing functional status

Eva Topinkova, Prague, Czech Republic

Nutritional characteristics in the elderly dialysis patients Daniel Teta, Lausanne, Switzerland

The best peritoneal dialysis program for elderly patients Olof Heimbürger, Stockholm, Sweden

New osmotic agents

Carnitine

Mario Bonomini, Chieti, Italy

Raymond T. Krediet, Amsterdam, The Netherlands

Hyperbranched polyglycerol

Asher Mendelson, London, Canada

Glucose polymers

John Leypoldt, Deerfield, U.S.A.

Personalised care and dialysis

Extended-hours hemodialysis: benefits and barriers Charles Chazot, Sainte Foy Les Lyon, France

Is thrice weekly dialysis adequate for all ESRD patients? Ercan Ok, Izmir, Turkey

Conservative treatment

Fergus Caskey, Bristol, United Kingdom

Management of advanced CKD in the elderly Steven J. Rosansky, Columbia, U.S.A.

Track 8 **Transplantation**

HLA and non-HLA Antibodies - Avoid them or treat them?

Non-HLA Antibodies - ready to enter the clinic arena? Magali Giral, Nantes, France

What is the best HLA-desensitisation protocol with regard to long term outcomes?

Ondrej Viklicky, Prague, Czech Republic
Post-transplant DSA – ignore, follow, treat?
Thomas Fehr, Zurich, Switzerland
Kidney exchange and domino-paired transplantation Willem Weimar, Rotterdam, The Netherlands

Viruses: transplantation in the light of new treatment options

Management of kidney transplant patient with chronic hepatitis C infection

Petar Kes, Zagreb, Croatia

HBV and kidney transplant patients

Fabrizio Fabrizi, Milan, Italy Treatment of HEV infection after transplantation Nassim Kamar, Toulouse, France

Update on vaccines for transplant candidates and recipients Martina Sester, Homburg/Saar, Germany

Age dependent problems in transplantation

Organ age and immune responses

Marian Klinger, Wroclaw, Poland

Transplantation in old recipients: what are the challenges? Julio Pascual, Barcelona, Spain

Psycho-social problems and adherence in adolescent kidney transplant recipients

Istvan Mucsi, Toronto, Canada

Disease recurrence – are there new treatment strategies on the horizon?

- Recurrence of atypical HUS, TMA post renal transplantation Moglie Donnette-Le Quintrec, Paris, France
- Recurrent Focal Glomerulosclerosis

Paolo Cravedi, New York, U.S.A.

Kidney transplantation in primary hyperoxaluria type 1 Pierre Cochat, Bron, France



Leading European Nephrology

CME COURSES

- EURECA-m Working Group Updates in cardiorenal cross-talks Hypertension, leukocytes and vascular disease
 - Carotid barostimulation in resistant hypertension **Patrick Rossignol**, Vandoeuvre-Les-Nancy, France
 - Cross talk between leukocytes and vessel wall as a source of vascular damage in uremia

Raymond Vanholder, Ghent, Belgium

- A new auto-immune disease: hypertension **Mehmet Kanbay**, Istanbul, Turkey

CKD-MBD, adipokines and vascular disease

- FGF-23: innocent bystander or causative factor in CKDassociated cardiovascular disease?
- Gunnar Heine, Homburg/Saar, Germany
- The bone-vascular cross-talk and CKD progression: FGF23 and ADMA interaction

Carmine Zoccali, Reggio Calabria, Italy

- Role of adipokines in cardiovascular complications in CKD patients — new evidence

Andrzej J. Wiecek, Katowice, Poland

- CKD-MBD Working Group
 An update on Mineral and Bone Disordes in CKD
 - Introduction

Mario Cozzolino, Milan, Italy

First session

- Evolving insights into the regulation of FGF23 and Klotho Marc Vervloet, Amsterdam, The Netherlands
- New biomarkers in CKD-MBD
 Sandro Mazzaferro, Rome, Italy
- Calciphylaxis the power of the dark calcification side **Vincent Brandenburg**, Aachen, Germany

Second session

- CaSR in CKD
 - **Ziad Massy**, Paris, France
- To D or not to D in CKD is VD treatment unavoidable?
 David Goldsmith, London, United Kingdom

Third session

- Adynamic Bone Disease: from bone to disease
 Jordi Bover, Barcelona, Spain
- Indications of bone biopsy in CKD

Pablo Antonio Ureña Torres, Saint-Ouen, France

- Closing remarks

Mario Cozzolino Mila

Mario Cozzolino, Milan, Italy

- DESCARTES Working Group Tolerance, minimization, and living donation in 2015 The race between tolerance and minimization strategies
 - The genetic determinants of acute rejection **Marc Abramowicz**, Brussels, Belgium
 - The genetic determinants of tolerance Speaker to be confirmed
 - To what extent can CNI be minimized?
 Klemens Budde. Berlin, Germany
 - Who needs anti-lymphocyte induction therapy in 2015? **Daniel Abramowicz**, Antwerp, Belgium

Hurdles of living-donor kidney transplantation

- What is the risk of dialysis or death after living donation?
 Umberto Maggiore, Parma, Italy
- The long road to living donor selection
 Søren Schwartz Sørensen, Copenhagen, Denmark
- The long road to recipient wait-listing Speaker to be confirmed
- Living kidney donation: future studies **Geir Mjøen**, Oslo, Norway
- Immunonephrology Working Group (IWG)
 Immune mediated renal diseases: news from the ERA-EDTA IWG

Autoantibodies for diagnosis and prognosis of glomerular diseases

- Anti-PLA2R antibodies in membranous nephropathy Elion Hoxha, Hamburg, Germany
- New and old auto antibodies in Lupus Nephritis
 Vladimir Tesar, Prague, Czech Republic
- ANCA in vasculitis new perspectives
 Mårten Segelmark, Linköping, Sweden
- Anti-complement antibodies in MPGN/C3 nephropathy Marina Noris, Bergamo, Italy

Clinical endpoints for clinical trials: toward a position paper

- IgA Nephropathy in the young Rosanna Coppo, Turin, Italy
- IgA Nephropathy in the adult Jürgen Floege, Aachen, Germany
- Lupus Nephritis

David Jayne, Cambridge, United Kingdom

- Membranous nephropathy

Jack F.M. Wetzels, Nijmegen, The Netherlands



EUDIAL Working Group

The rationale for high volume haemodiafiltration

- Why do we need convective clearance and different treatment options

Speaker to be confirmed

- High volume haemodiafiltration in clinical practice **Muriel P. Grooteman**, Amsterdam, The Netherlands
- Clinical outcomes with HDF Speaker to be confirmed

Providing high volume haemodiafiltration in clinical practice

 Maintaining water quality for HDF - how much testing is required?

Elizabeth Lindley, Leeds, United Kingdom

- Why should higher volume HDF improve patient survival? **Francesco Locatelli**, Lecco, Italy
- Is HDF a more expensive treatment compared to other modalities?

Antonio Santoro, Bologna, Italy

DIABESITY Working Group DIABESITY: Diabetes, Obesity and Renal Disease

- Connection between obesity, type 2 diabetes and renal disease

Bjørn Richelsen, Aarhus, Denmark

Obesity: a risk factor for renal disease, evidence from clinical studies

Manuel Praga, Madrid, Spain

 Diabetes, obesity and renal disease: lessons from recent clinical trials

Speaker to be confirmed

 The role of carnosine metabolism in CKD in patients with type-2 diabetes

Speaker to be confirmed

- New markers of renal disease in obesity and diabetes Radovan Hojs, Maribor, Slovenia
- Regression of renal lesions in diabetic and non diabetic renal diseases

Giuseppe Remuzzi, Bergamo, Italy

• EUTox Working group Uremic toxicity: the compounds and how to clear them Part |

- Redefining uremic retention solutes and uremic toxins: a novel conceptual framework with therapeutic implications Speaker to be confirmed
- Aryl hydrocarbon receptor, a new signaling pathway activated by uremia

Stéphane Burtey, Marseille, France

- Endothelial microparticles and vascular calcification **J. Mariano Rodriguez**, Cordoba, Spain

Part II

- Dialysis procedures and artificial toxicity in uraemic patients **Bernd Stegmayr**, Umea, Sweden
- Enhancing dialysis efficacy: dissociating protein-bound uremic retention solutes to increase clearance Speaker to be confirmed
- Enhancing dialysis efficacy: modifying pore size and physics to increase removal Speaker to be confirmed

Working Group on Inherited Kidney Disorders (WGIKD) An update on Inherited Kidney Disorders

- Genetic diseases of tubular potassium transport **Detlef Bockenhauer**, London, United Kingdom
- Autosomal Dominant Tubulointerstitial Kidney Disease Olivier Devuyst, Zurich, Switzerland
- Clinical trials in ADPKD: where we are and where we go from here

Ron T. Gansevoort, Groningen, The Netherlands

Complement-mediated glomerular injury: lessons from animal models

Katherine Vernon, London, United Kingdom

 Steroid resistant nephrotic syndrome: lessons from the Podonet registry

Franz Schaefer, Heidelberg, Germany

Proteomic and metabolomics analyses in kidney diseases
 Robert Unwin, London, United Kingdom

Nutrition Working Group Do renal diseases need a Nutrition Working Group?

- Nutritional disorders: also after kidney transplantation
 Pieter M. Ter Wee, Amsterdam, The Netherlands
- Practical screening and assessment of nutritional status in CKD: what, when and by whom?

Lina Johansson, London, United Kingdom

- The conundrum of salt and protein intake in renal progression

Vincenzo Bellizzi, Salerno, Italy

- Controlling metabolic acidosis with a healthy diet in CKD patients: feasible?

Philippe Chauveau, Gradignan, France

EuroPD Working Group Basic clinical CME

Physiology and pathophysiology of peritoneal membrane transport

Anabela Rodrigues, Porto, Portugal

- Peritoneal membrane testing and adequate prescription of peritoneal dialysis regimens in clinical practice
 Miguel Perez Fontan, La Coruña, Spain
- Outcomes on PD: lessons from different cohort and registry studies

Speaker to be confirmed

 Framing information during pre-dialysis education: actively supporting patients' decision-making
 Hilary Bekker, Leeds, United Kingdom

EuroPD Working Group Advanced level clinical CME

- Management of diabetics on PD James Heaf, Herley, Denmark
- CKD-MBD in PD patients
- Mario Cozzolino, Milan, Italy
- Peritoneal dialysis for treatment of congestive heart failure Speaker to be confirmed
- Incompliance and adherence: can we change it?
 Monika Lichodziejewska-Niemierko, Gdańsk, Poland



Leading European Nephrology

ERBP

Asking the right questions: the guideline on the frail and elderly example

Evi Nagler, Ghent, Belgium

- Considering the right outcomes: on hyponatraemia and calcimimetics
- Ionut Nistor, Iasi, Romania
- Rare disease? Challenging guideline! Davide Bolignano, Reggio Calabria, Italy
- Get the guideline to work: the diabetes guideline example Sabine Van Der Veer, Manchester, United Kingdom
- How systematic is systematic: the vascular access guideline Speaker to be confirmed
- Did you read the guideline? Wim Van Biesen, Ghent, Belgium

Cross-talk in Renal Epidemiology

First part

- Selection bias in renal research Carmine Zoccali, Reggio Calabria, Italy
- Missing data
- Speaker to be confirmed
- Linkage to achieve big data Speaker to be confirmed

Second part

IV análysis

Friedo W. Dekker, Leiden, The Netherlands

Using propensity scores to adjust for confounding in medical research

Stijn Vansteelandt, Ghent, Belgium

Rheumatology for nephrologists

- Diagnostic approach to the CKD patient with joint pain Hans-Joachim Anders, Munich, Germany
- Diagnosis and treatment of gout in CKD patients Speaker to be confirmed
- What do nephrologists need to know about the autoinflammatory disorders?

Helen Lachmann, London, United Kingdom

- Takayasu arteritis and the kidney

Justin Mason, London, United Kingdom

Why drug monitoring in lupus nephritis

Nathalie Costedoat-Chalumeau, Paris, France The dilemma: disease activity in lupus nephritis

Philipp Enghard, Berlin, Germany

Perspectives on renal stone disease: a 360° appraisal. A series of case-based presentations on renal stone

- Genetics of calcium balance and hypercalciuria Rajesh V. Thakker, Oxford, United Kingdom
- Nephrology and Urology

Shabbir Moochhala, London, United Kingdom

- Clinical Chemistry and renal stone disease Gill Rumsby, London, United Kingdom and Marta Lapsley, London, United Kingdom
- Urology and Nephrology

Pietro Manuel Ferraro, Rome, Italy

Exercise as Medicine in CKD

- The new polypill Exercise training in patients with CKD Naomi Clyne, Lund, Sweden
- Effects of exercise training on functional status and quality of life in CKD

Evangelia Kouidi, Thessaloniki, Greece

- Wasting, nutrition and exercise training in CKD Adamasco Cupisti, Pisa, Italy
- Evaluation of functional status before and during exercise

Pelagia Koufaki, Edinburgh, United Kingdom

 Prescription of exercise training – practical aspects at different stages of CKD

Rolfdieter Krause, Berlin, Germany

Current questions in clinical practice regarding AKI

- Sense and nonsense of classifications of AKI Wim Van Biesen, Ghent, Belgium
- Assessment of volume status in patients at ICU **Jeroen Kooman**, Maastricht, The Netherlands
- Anticoagulation in AKI-RRT: where do we stand in 2015? Speaker to be confirmed
- Dosing regimens in patients with AKI on RRT Andrew Lewington, Leeds, United Kingdom

Genetics and kidney disease for the beginners

Epigenetics in kidney disease

Gerjan Navis, Groningen, The Netherlands

Micro-RNAs and their importance in kidney disease Ariela Benigni, Bergamo, Italy

Methodology of GWAS and its application to kidney disease Carsten Boeger, Regensburg, Germany

 Next generation sequencing for research and diagnostics of kidney disease

Nine V.A.M. Knoers, Utrecht, The Netherlands

- The Lancet Workshop
- Imaging in Nephrology

SATELLITE MEETINGS

TNT Renal - A Hands-on Renal Nutrition Course for **Healthcare Professionals**

In collaboration with the International Society of Renal Nutrition and Metabolism (ISRNM) London, United Kingdom - May 26-27, 2015

www.renal-nutrition.org

4th Update on Fabry Nephropathy – Biomarkers, Progression and Treatment Opportunities

Manchester, United Kingdom – June 1-2, 2015



Congress Information

CME COURSES

Participation in the CME Courses on May 28, 2015 will be on a "first come first served" basis. The courses are reserved to regularly registered congress members and are included in the registration fee. In order to participate all regularly registered congress members must go to the session halls and have their badge scanned by the hostesses at the entrance (at participant's own responsibility).

INSURANCE/LIABILITY

The ERA-EDTA is insured only to meet claims arising from incidents caused by the organisers and their equipment. Participants, exhibitors and visitors are strongly recommended to be properly insured against accidents they may suffer when travelling to and from the Congress and during the Congress itself.

LANGUAGE OF THE CONGRESS

The official language of the Congress is English. No simultaneous translation will be provided.

PRESS CENTRE

For accredited journalists only. Full press working facilities and activities including press conferences, press releases and services for press will be available at the ExCeL London Congress Center during the Congress

UEMS CME CREDITS

An application will be made to the European Accreditation Council for Continuing Medical Education (EACCME) for CME accreditation of the 52nd ERA-EDTA Congress and pre-congress CMEs. The EACCME is an institution of the European Union of Medical Specialists (UEMS). Delegates receiving certificates

for ECMEC credits must contact their National Accreditation Authority to have the credits recognized (or converted) in their country of practice.

EACCME credits are recognized by the American Medical Association (AMA) towards the Physician's Recognition Award (PRA). To convert EACCME credit to AMA PRA category 1credit, you should contact the AMA directly.

How to receive UEMS CME credits

ERA-EDTA will track attendance of congress members during the congress in the ExCeL London Congress Center each day. All regularly registered congress members must go to the session halls and have their badge scanned by the hostesses at the entrance (at participant's own responsibility). Congress members will then be awarded the number of credits towards the hours actually spent participating in the sessions of the congress. ERA-EDTA will send UEMS CME Certificate only upon specific request. Regularly registered congress members can either request to receive it by going personally to the UEMS CME desk (starting May 28, 2015) during the congress, or by requesting it in writing by post or e-mail (cmecredits@era-edta.org) during or immediately after the Congress. The certificate will then be sent after the congress, approximately one month after it is finished.

VENUE

ExCeL London Congress Center

One Western Gateway (East Entrance - DLR station: Prince Regent) Royal Victoria Dock - London E16 1XL E-mail: info@excel-london.co.uk Website: www.excel-london.co.uk



RENAL ASSOCIATION SOLVEN

Congress Membership Rules

Leading European Nephrology

Important: by submitting your registration form you accept and agree with the registration rules. Please read the preregistration rules below before beginning the online registration procedure.

REGISTRATION FEES AND DEADLINES

	PRE REGISTRATIONS	ONSITE RE	GISTRATIONS
	From February 26 to April 29, 2015	From April 30 to May 18, 2015	From May 27, 2015
Status	Late	Last minute	Onsite
ERA-EDTA / UK RENAL ASSOCIATION MEMBER (individual and regular group)	EUR 330.00	EUR 350.00	EUR 350.00
ERA-EDTA NON MEMBER (individual and regular group)	EUR 445.00	EUR 470.00	EUR 470.00
STUDENT/TRAINEE* (only onsite registration)			EUR 250.00
LOCAL STUDENT** (only onsite registration)			EUR 50.00
1-2 DAYS ERA-EDTA / UK RENAL ASSOCIATION MEMBER*** (only onsite registration)			EUR 120.00 (1 day) EUR 240.00 (2 days)
1-2 DAYS NON MEMBER (only onsite registration)			EUR 160.00 (1 day) EUR 320.00 (2 days)

IMPORTANT: Please note that congress members submitting and paying their registration fee as non-members will not be entitled to reimbursement if, at a later stage, they become members.

- *In order to be eligible for this fee, students/trainees must be 35 years old or younger, thus the birth year must not be earlier than 1980 furthermore the registration cannot be sponsored by a company/agency/institution etc. You must personally hand over a photocopy of your picture ID (passport, identity card, driving license with birth date), a photocopy of your original student's card and a signed letter from your mentor/university to prove your student/trainee status. ERA-EDTA reserves the right to verify all declarations.
- **This exceptionally low congress membership fee is reserved for students living in the country where the congress is held (United Kingdom). In order to be eligible for this fee, local students must be 28 years old or younger, thus the birth year must not be earlier than 1987 futhermore the registration cannot be sponsored by a company/agency/institution etc. In order to register with this special fee you must personally hand over a photocopy of your picture ID (passport, identity card, driving license with birth date), a photocopy of your original student's card and a signed original letter from your mentor/university to prove your student status. ERA-EDTA reserves the right to verify all declarations.
- ***1 Day registrations cannot be made in advance and are available only onsite, starting May 27, 2015. This type of registration entitles admission to the session and poster and exhibition halls only on the date mentioned on the congress badge as well as to receive the bag, the proper EACCME/UEMS Credits and Certificate of Attendance for that same day. It is also possible to make two one-day registrations if you are able to attend the congress for two days (consecutive or not). These congress membership fees are available only onsite.
- ****see the paragraph "group registration"

CONGRESS REGISTRATION INCLUDES:

- Admission to Scientific and Poster Session, Welcome Ceremony, Welcome Reception and Industrial Exhibition
- Coffee breaks
- CME courses on May 28, 2015
- Congress bag, final program, access to the abstracts, e-materials, Certificate of attendance, CME credit certificate

Accompanying guest registration is not available; however, all participants can take part, with their accompanying guests, in the Welcome Ceremony and Welcome Reception on May 28, 2015. All participants must wear their name badge when attending any congress event.

HOW TO REGISTER

- All registrations must be submitted online at www.era-edta2015.org
- Requests to register via e-mail, fax or phone cannot be taken into consideration: all participants and sponsors must register through the online registration procedure.
- No registration is valid without payment and both must be done at the same time.
- All references to a date or a deadline, mentioned in this and other meeting documents, refer to the Central European Time zone (CET).
- In case you are not able to complete your online registration because of a system error, please inform the ERA-EDTA Registration Dept. as soon as possible and provide details of the error message on your computer and/or a screenshot of the page. E-mail: registrations@era-edta.org, fax +39-0521-959242.
- If you are unable to attend the congress you can cancel your registration, within certain limits and conditions (see the Cancellation Policy terms).



Congress Membership Rules

 Name changes are not allowed, so you cannot transfer your registration to another person.

ERA-EDTA MEMBERSHIP INFORMATION

New applicants and members with outstanding membership fees, wishing to sign up/pay for ERA-EDTA membership in order to benefit from the reduced congress membership registration fee, must apply for membership, or pay the outstanding fees, no later than 10 working days prior to the respective registration deadlines.

Congress members submitting and paying their registration fee as non-members will not be entitled to reimbursement if, at a later stage, they become members.

GROUP REGISTRATION

If you need to register a group of 3 or more delegates, you must submit payment and names immediately. Check the fee under the "REGISTRATION FEES AND DEADLINES" paragraph.

LAST MINUTE AND ONSITE REGISTRATION

Last minute registrations allows participants, who did not preregister, to register online starting April 30 to May 18, 2015. This will allow them to already pay the onsite fee and then print their badge directly at the ExCeL London Congress Center starting from May 27, 2015 at 11.00 am.

For all information check the online registration link on our website, available after the late deadline of April 29, 2015.

Onsite registrations at ExCeL London will start on **May 27, 2015**, at **11.00**.

You will receive your badge immediately and then you will be able to collect your bag, lanyard and badge holder at the Bag distribution counters by having your original badge scanned.

- New applicants and members with outstanding membership fees, wishing to sign up/pay for ERA-EDTA membership in order to benefit from the reduced congress membership registration fee, must apply for membership and/or pay their outstanding fees, no later than 10 working days prior to the first day of registration (May 14, 2015).
- You can pay by credit card (Visa, MasterCard or American Express) or by cash (Euro and British Pounds are the only accepted currencies). Make sure that you have your credit card code or PIN to process and authorize the charge. If your credit card requires security certification for online payments, please be sure to have the relevant password.
- You can make your payment in advance by direct money transfer (using the same account as for the pre-registrations) and have the original debit slip issued by your bank with you. If you pay the late fee by bank transfer after the late deadline, you will be asked to pay the difference between this fee and the onsite fee directly onsite.
- We regret to inform that payments by cheque cannot be accepted.

METHOD OF PAYMENT

 You can pay online by credit card (Visa, MasterCard and American Express) at the same time as you submit your registration or by direct money transfer to the ERA-EDTA bank account mentioned below.

ERA-EDTA Bank details for transfers:

Beneficiary: European Renal Association - European Dialysis and Transplant Association

UBS ÅG, 45, Bahnhofstrasse CH-8098 Zurich, Switzerland Account number: 236-473.242.60 E BIC (SWIFT): UBSWCHZH80A IBAN: CH75 0023 6236 4732 4260 E

Payments by bank transfer must be done as soon as you receive

your e-confirmation or at the latest within 5 working days. Euro (EUR) is the only accepted currency.

The bank's fees for the money transfer must be paid by the sender. If the amount you send is incorrect and not sufficient to cover your registration fee your registration will not be valid.

Be sure to include, as the reason for payment, your name and congress registration identification number (written in your e-confirmation), otherwise it will not be possible for ERA-EDTA to match your payment with your registration.

If you pay by bank transfer, remember to register online: failure to do this will mean that you will not be included in the pre-registered participants list and will have to register again as a completely new registration.

If you are a sponsor and are registering a group, include, as the reason for payment, the company name and registration identification number of the group.

• Cashpayments will be accepted only for onsite registrations. Please check the box "LAST MINUTE AND ONSITE REGISTRATIONS".

RECEIPT AND REQUEST OF PAYMENT

Receipts are not sent automatically. If you need one, remember to tick the appropriate box in the registration form (step 5 "method of payment").

If you need a request of payment in order to make a bank transfer, remember to tick the appropriate box in the online registration form (step 5 "method of payment").

Please note that ERA-EDTA will not issue VAT invoices. In fact this congress is an educational initiative for professionals, directly provided by a Registered Charity (ERA-EDTA) and not subject to VAT.

CANCELLATION POLICY

Before April 29, 2015	After April 29, 2015
75% of the amount paid,	No refund
net of bank charges.	of the amount paid.

All reimbursements will be done after the congress: the deadline to claim reimbursement is October 31, 2015. If the badge is used, there cannot be any refund. **NO NAME CHANGES ARE POSSIBLE.**



Congress Membership Rules

BADGE AND CONGRESS MATERIAL

• BADGE Individual:

- Pre-registrations: Badges can be picked up only after showing the confirmation letter with the barcode, that you received by e-mail before the event, to the "badge print- individual" desk in the Registration Area of the ExCeL London Congress Center starting May 27, 2015 at 11.00 a.m. The reprint of lost or forgotten badges costs EUR 20.
- Last minute registrations: Badges can be picked up only after showing the e-confirmation letter with the barcode, that you received by e-mail after the online registration, to the "badge print- individual" desk in the Registration Area of the ExCeL London Congress Center starting May 27, 2015 at 11.00 a.m. The reprint of lost or forgotten badges costs EUR 20.
- Onsite registrations: after registering at the "new registration
 individual" desk in the Registration Area of the ExCeL London
 Congress Center you will receive your badge immediately. The
 reprint of lost or forgotten badges costs EUR 20.

• BADGE Groups:

Groups may request to receive the badge before the congress starts.

You must choose this option during the online registration. Please provide just one address, as the ERA-EDTA will not send the congress materials to multiple addresses.

If you prefer to print the badges directly at the congress **venue** starting from May 27, 2015 at 11.00, please show the confirmation letter to the "badge print- groups" desk at the ExCeL London Congress Center.

A company contact person has to print all the badges and give them to the respective guests. In order to do so he/she must provide his/her mobile phone number.

If the main contact collects all the badges, he/she will be personally responsible for delivering them to the guests.

No free badge reprints are available for those guests who didn't receive the badges from the main group contact.

The reprint of lost or forgotten badges costs EUR 20.

CONGRESS MATERIAL

Starting from May 27, 2015 at 11.00 am congress bags and badge-holders can be picked up at the Bag Distribution Desk located in the Registration Area of the ExCeL London Congress Center by having your original badge scanned.

CERTIFICATE OF ATTENDANCE

All regularly registered delegates can collect their certificate of attendance at the appropriate desk ("Certificate of Attendance") located in the Registration Area starting May 28, 2015 after 15.00 hours. To obtain the certificate of attendance, it is mandatory to go to this desk and to have the original badge scanned; so if you are attending the entire congress, ask for your certificate only on the last day. The certificate of attendance for the whole congress will only be given on May 31, 2015. If you are not able to go to this desk to collect your certificate due to other commitments, you can send a written request to the ERA-EDTA Congress Office after the congress (e-mail: registrations@era-edta.org), it will then be sent to you by e-mail.

DISCLAIMER

ERA-EDTA collects and processes personal information to provide you with the details regarding ERA-EDTA and its activities. This information will be used for accounting and commercial purposes by ERA-EDTA and/or Euromeetings srl in compliance with the Italian Legislative Decree 195/2003 and in accordance with the eight Data Protection Principles contained in the UK's Data Protection Act 1998. Each participant will receive a badge with name and barcode. The bar code contains all information which was filled in the registration form and can be accessed by ERA-EDTA and/or Euromeetings only. By accepting to have the badge scanned at the Industry Symposia and Industrial Exhibition, the participant provides that specific company with the information (name, address and e-mail) already given to ERA-EDTA. Congress members can ask that this information be changed, corrected or cancelled at any time by contacting the ERA-EDTA Headquarters.

IMPORTANT DATES

Regular (individual and group) late pre-registrations:

Last minute registrations:

Onsite registrations:

from February 26 to April 29, 2015 from April 30 to May 18, 2015 May 27, 2015





Frequently Asked Questions

- 1. I have become a member of ERA-EDTA very recently and I have not yet received my Membership Card and number. If the deadline is approaching you can contact the ERA-EDTA Membership Office (membership@era-edta.org) and explain the problem. Your position will be verified and you will be provided with your number (either a provisional one, or your definitive membership number). Please notice that to take advantage of the congress registration discount, all ERA-EDTA memberships must be submitted, and the membership fees regularly paid for, no later than 10 working days prior to the set dead-lines.
- I am a member of ERA-EDTA but when I type my membership number in the form the system says my status is not regular.

This can happen in three cases: 1. You have not yet paid this year's membership fee. 2. You have made your payment only one or two days ago. 3. You have not typed your name as it is printed in your ERA-EDTA membership card. In case 1, settle your membership fee and wait for one week before trying again to register for the congress. In case 2, try again to register after a full week has passed from your payment. In case 3, go back to step 2 and insert your name exactly as it is printed in the ERA-EDTA membership card. In doubt, contact the membership office for help (membership@era-edta.org).

3. I became ERA-EDTA member after I registered: can I ask for a refund?

No. Congress members submitting and paying their registration fee as non-members will not be entitled to reimbursement if, at a later stage, they become members.

4. I have made my online registration before February 25, 2015 and ticked the "Paid by direct money transfer" box, but I have been able to make the payment only after that date. Will I be considered as registered or not?

By making your payment after the deadline you have missed the opportunity of the Early Registration rate. Your registration will be held in a "stand-by" until you pay the difference between the Late Registration rate and the Early Registration one. You will receive your confirmation only after settling the full amount.

5. Ihave submitted an abstract and my Institute will authorize me to attend the congress only if I have a poster or an oral communication to present. The deadline for early registrations is too early for me to know if my abstract is accepted. Has ERA-EDTA taken into consideration this kind of problem?

Yes. The only exception to the deadline for early registrations is precisely the case of people who have an accepted abstract and have not registered before the deadline. You will be able to register after February 25, 2015, but earlier than

April 29, 2015, and pay the early registration fee. You will find information about this in the acceptance letter of your abstract.

6. I have been registered by a company and I would like to receive my badge in advance. Can I obtain it from the ERA-EDTA Congress Office?

No. The company that invited you is responsible for giving you the badge.

7. I have registered for the congress, afterwards a company has offered to sponsor my participation. Can I transfer my original registration to a colleague?

No. Each registration is strictly personal. You will have your original registration refunded by ERA-EDTA, but your colleague will have to make a new registration.

8. I am registering a group of doctors on behalf of a sponsor. I am asked to provide addresses for each of them, but I don't have this information. What can I do?

Address details of company/agency will not be accepted and the registration of your guests will not be accepted with the company details. If you do not have these details during registration procedure, you can supply them even at a later stage however this must be done no later than the April 29, 2015. The following details are absolutely necessary for each doctor: hospital, city, country and e-mail.

9 I registered for the congress well in advance, but now I have found I cannot attend. Can I transfer my registration to a colleague?

No. Each registration is strictly personal and cannot, at any time, be transferred to another person. You can receive your money back (minus 25% for handling charges) if you cancel your registration before April 29, 2015. After this date no refund is however possible.

10. I must cancel my registrations. Can I do it by phone?

No. Cancellations must be sent in writing by April 29, 2015 (post, e-mail or fax). Please provide all the details that can help the ERA-EDTA Congress Office to identify you correctly, e.g. give your first name in full and not just the initials, mention the type of registration you had, quote your registration number if you had already received your confirmation.

11. I have cancelled my registration well before April 29, 2015 but I have not yet received the refund I was promised.

All refunds are done only after the congress.



about Registrations

Leading European Nephrology

12. I have missed the Late Registration deadline. Can I send a payment for the onsite registration fee and pre-register anyway?

After the late deadline April 29, 2015 and approximately a week before the congress starts, it will be possible to register by means of the last minute registration procedure: check the full information, fees and deadlines in the onsite chapter of the Congress registration rules or the online registration form.

13. I will be able to attend this congress just for one day. Can I pre-register for that specific date?

You can register for one day, but you can do it only onsite, preregistration for this specific one day registration is not possible

14. Can I send a cheque to pay my registration fee?

No. Due to substantial changes in the banking system over the last few years, the time and costs for processing cheques have increased dramatically, so ERA-EDTA cannot accept this type of payment any more.

15. I see that on the first day of the congress the registration counters will close at 19.00, but I expect to arrive not earlier than 19.30. Can I inform the Congress Office in advance and ask to make an exception for me? I don't want to miss the Welcome Ceremony.

You will have to register the next day. However you will be admitted to the Welcome Ceremony and to the Welcome Cocktail even without the badge. Badge controls will be done only for the scientific sessions.

16. What methods of payment do you accept?

We accept credit cards (Visa, Mastercard and American Express) and bank transfer. Payments must be made in Euro only. Cash payments are accepted only onsite (Euro and British Pounds).

17. Do you accept other currencies?

We accept Euro only, however when a congress is held in a Country that does not use them, we accept local currency for onsite registration and cash only.

18. Do you offer any discounted fees?

Yes, we offer a discounted fee to all ERA-EDTA members and UKRA members who have regularly settled their membership fee. We also offer a discounted fee for students and trainees, however these latter fees are available only onsite.

19. How can I prove my student/trainee status in order to register onsite?

You need to ask your hospital /university a letter from your mentor on official letterhead, which confirms your status of student/trainee. All letters must be in English and must be given to the hostess at the onsite registration counters together with the other requested documents needed to pay this fee.

20. Can I cancel my pre-registration and receive a reimbursement?

Yes, within the set conditions and deadline (April 29, 2015). We must receive your cancellation by e-mail and the registration fee will be refunded deducted of 25%. Bank charges will also be deducted.

21. When I finished my online registration I received an e-mail: is this my confirmation?

No. The e-mail is automatically sent when you finish your online registration. The confirmation letter with id registration number and bar code will be sent when your registration is processed.

22. Does the registration include lunch/dinner/transportation tickets?

No, it does not include any of the above.

23. Has a shuttle bus been organised between the hotels and the congress centre?

No, a shuttle bus has not been organised.

24. I wish to register a group of guests: can I send a list by e-mail?

No. We accept only online registrations. In order to register your guests, you must download the excel spreadsheet at step 1 of the online registration procedure, fill it in and upload it in the system as soon as it is ready.

25. I have registered a group of guests and now I must add more: how can I do this?

You can send your request to the ERA-EDTA Congress Office with your new list attached using the same excel format. We shall then give you all instructions on how to proceed with the new registration and payment.

26. I do not have the details of all of my guests: can I pay now and send the details at a later stage?

No, unless you book a blank list registration by the set deadline. Check all information, fee and deadlines in the "Group registrations (blank list)" section.

If you do not book a blank list, then both registration AND payment must be received at the same time: check full set of rules for more information regarding this matter.

27. Can I register onsite directly in London?

Yes. It is possible to register each day of the congress, including May 27, 2015. For all information, check the onsite rule policy.

These FAQs do not answer your questions? Contact us: registrations@era-edta.org



an alliance of the world's leading airlines working as one.

airberlin American Airlines British Airways Cathay Pacific Finnair Iberia Japan Airlines LAN TAM Malaysia Airlines Qantas Qatar Airways Royal Jordanian S7 Airlines SriLankan Airlines

one world benefits are available only to passengers on scheduled flights that are both marketed and operated by a one world member airline (marketed means that there must be a oneworld member airline's flight number on your ticket). For information on oneworld, visit www.oneworld.com. airberlin, American Airlines, British Airways, Cathay Pacific, Finnair, Iberia, Japan Airlines, LAN, Malaysia Airlines, Qantas, Qatar Airways, Royal Jordanian, S7 Airlines, SriLankan Airlines, TAM Airlines and oneworld are trademarks of their respective companies. TAM Airlines (Paraguay) is currently not a part of oneworld.

Welcome to Londo

Some 2,000 years of dazzling living history, royal palaces, parks, and world-class galleries sit comfortably alongside cutting-edge industry clusters, sky-high hotels and Michelin-starred restaurants.

No other city on the planet matches London for energy, diversity, creativity and constant reinvention. A city that offers 8,000 restaurants,173 museums and over 850 galleries, as well as a great range of accommodation, free attractions and an efficient transport network.

Travel to London

By air

London is one of the most accessible cities in Europe, with 5 international airports offering direct flights to 348 destinations. London Heathrow is the largest, whilst London City airport puts you on the doorstep of east London and ExCeL conference centre. London Gatwick is located to the south of the city, and London Luton and Stansted offer flights by many low-cost carriers.

By train

Express trains link Heathrow and Gatwick airports to London city centre in less than 30 minutes, with four trains running every hour. Eurostar operates 22 trains a day from Paris, bringing visitors into central London in just over two hours, while 11 trains a day link the city to Brussels in less than two hours.



Travel in London

Public Transport

London has one of the largest urban transport networks in the world. The quickest way to get around is on the underground system known as the Tube. With 11 colour-coded lines and 270 stations, it reaches every corner of the city, whilst the Docklands Light Railway (DLR) is the quickest way to reach ExCeL and venues in east London.

Oyster smartcards, travel cards and tickets can be purchased at stations or online and are accepted on the tube network, DLR trains and buses. The tube runs until midnight on weekdays and, from 2015, all night on weekends.

Taxis

More than 20,000 licenses black cabs can be hailed on the street, for metered fares, or pre-booked at fixed rates.

Thames Clippers

Thames Clipper catamarans leave every 20 minutes from piers on the doorstep of the London Eye, Tower Bridge, Greenwich and the O2 arena.



Cable Car

The Emirates Air Line is London's first cable car and offers a five-minute 'flight' over the Thames, rising to a height of 90m. It links ExCeL conference centre to one of the world's most popular entertainment venues, the O2, by offering spectacular views over London.

For information on travel in London see visitlondon. com/travel and tfl.gov.uk

Currency

The UK's currency is the pound sterling (£ / GBP). Credit cards are widely accepted.

Climate

Spring, summer and autumn are the best times to visit London. Though it does not rain every day, it is advisable to bring an umbrella, along with comfortable shoes for walking.

Language

The mother tongue is English, but over 230 languages are spoken in London.

Electricity

The United Kingdom, like most other European countries, uses 230- Volt/50 Hz AC current. Plugs have three rectangular prongs that form a triangle. Plan to bring an adapter plug and even a transformer for your personal appliances. Many hotels have international sockets to accommodate other plugs.

Visa

Citizens from countries outside the EU/EEA may require a visa. Contact your nearest British Consulate for more information or visit ukba.homeoffice.gov.uk.

Tourist Information

For the latest information of what's going on in London, tips on shopping, dining, theatre and more, visit the official visitor guide for London visitlondon.com.



Passport and Visa Information

VISA / INVITATION LETTER ENTRY REQUIREMENTS / VISAS

Upon request, the Organization Secretariat will be pleased to send a personal invitation to all participants, to facilitate visa requests and other formalities. This letter should NOT be considered as an offer of any kind of financial support on behalf of the organizers. An official invitation letter can be requested by writing to the President of the Congress Prof. David Goldsmith (e-mail: visa@era-edta.org) at least three months in advance.

This letter however does NOT involve any commitments by the Congress Organizers to cover fees, accommodation, travel expenses or other costs connected to the participation in the Congress. ERA-EDTA will not be held responsible for visa that are not granted. International registrants who require a letter of invitation, will first need to complete the online registration for the 52nd ERA-EDTA Congress.

Letters of invitation for spouse/guest registrants will only be provided if the accompanying individual has completed his or her congress registration.

Citizens of the EU as well as from Australia, Canada, New Zealand, South Africa and the USA do not need a visa to enter the United Kingdom.

However, visa regulations are subject to change, it is therefore recommended to check at www.ukba.homeoffice.gov.uk/visas-immigration or with your local British embassy before leaving home. As the application process for visas may be time consuming, it is recommended to apply as early as possible for a visa.

CONDITIONS OF VISA

You can apply for a General Visitor visa if:

- you want to visit the UK for leisure, e.g. as a tourist on holiday
- you are from outside the European Economic Area (EEA) or Switzerland
- you are visiting friends or family who aren't permanent residents in the UK
- 18 or over
- travelling to the UK for leisure (not work or study)
- able to support yourself for the duration of your trip
- not in transit to another country, except for Ireland, the Isle of Man or the Channel Islands
- able to pay for your return or onward journey



APPLICATION

You can apply for a visa up to 3 months before your date of travel to the UK.

You should get a decision on your visa within 3 weeks.

Check the guide processing times to find out how long getting a visa might take in the country you are applying from.

The visa application has to be presented to the Embassy of the country of main destination (determined by the purpose of the journey and the length of stay). If your main destination cannot be ascertained, the Schengen state through which you first enter the territory of these countries is responsible for granting the visa.

Different documents are required depending on the purpose of your journey. Additional documents or information may be required.

WHAT DOCUMENTS WILL BE REQUIRED?

When you apply you will need to provide:

- a current passport or other valid travel identification
- 2 passport size colour photographs
- evidence that you can support yourself during your trip, eg bank statements or payslips for the last 6 months
- details of where you intend to stay and your travel plans you shouldn't pay for accommodation or travel until you get your visa

WHO REQUIRES A VISA?

The Nationals or citizens of the following countries or territorial entities need a visa for the United Kingdom:

Afghanistan, Albania, Algeria, Angola, Armenia, Azerbaijan, Bahrain, Bangladesh, Belarus, Benin, Bhutan, Bolivia, Bosnia Herzegovina, Burkina Faso, Burma, Burundi, Cambodia, Cameroon, Cape Verde, Central African Republic, Chad, People's Republic of China, Colombia, Comoros, Cuba, Cyprus (northern part), Democratic, Republic of the Congo, Djibouti, Dominican Republic, Ecuador, Egypt, Equatorial Guinea, Eritrea, Ethiopia, Fiji, Gabon, Gambia, Georgia, Ghana, Guinea, Guinea Bissau, Guyana, Haiti, India, Indonesia, Iran, Iraq, Ivory Coast, Jamaica, Jordan, Kazakhstan, Kenya, Korea (North), Kosovo*, Kuwait, Kyrgyzstan, Laos, Lebanon, Lesotho, Liberia, Libya, Macau (travel permit only), Macedonia, Madagascar, Malawi, Mali, Mauritania, Moldova, Mongolia, Montenegro, Morocco, Mozambique, Nepal, Niger, Nigeria, Occupied Palestinian Territories, Oman, Pakistan, Peru, Philippines, Qatar, Russia, Rwanda, Sao Tome e Principe, Saudi Arabia, Senegal, Serbia, Sierra Leone, Somalia, South Africa, Sri Lanka, Sudan, Surinam, Swaziland, Syria, Taiwan, Tajikistan, Tanzania, Thailand, Togo, Tunisia, Turkey, Turkmenistan, Uganda, Ukraine, United Arab Emirates, Uzbekistan, Vatican City (Holy See Service & Emergency passport holders only), Venezuela, Vietnam, Yemen, Zambia, Zimbabwe,

^{*} This designation is without prejudice to positions on status, and is in line with UNSCR 1244/99 and the ICJ Opinion on the Kosovo declaration of independence.



Hotel Accommodation

Leading European Nephrology

HOTEL ACCOMMODATION

Congrex Travel has been appointed as the official housing agency for the 52nd ERA-EDTA Congress 2015 and is holding a major room block for delegates, exhibitors and speakers. Due to their extensive experience in handling hotel accommodation for large congresses in London, Congrex Travel offers multilingual consulting and personal support to help choose the right hotel.

CONGREX TRAVEL LTD.

Peter Merian-Strasse 80 CH - 4002 Basel Phone: +41 61 690 94 10

Fax: +41 61 690 94 14

E-mail: era-edta.hotel@congrex-switzerland.com

www.congrex-switzerland.com

SELECTION OF HOTELS

In close consultation with the organization of the 52nd ERA-EDTA Congress, Congrex Travel Ltd. made a wide selection of hotels in London for you. The hotels are divided into various categories and are situated around the congress centre or within the city of London. All rates are indicated in EUR and include breakfast, service and taxes. All rates are net rates and are subject to change in case of VAT changes. Kindly note that the contingents are being offered to various companies simultaneously and are sold on a first come - first serve basis. Early reservation is highly recommended. On the congress website www.era-edta2015.org full details on how to make hotel reservations are available.

On this page you can read a comprehensive description of each hotel, including photos, hotel features and a map of London.

INDIVIDUAL RESERVATIONS

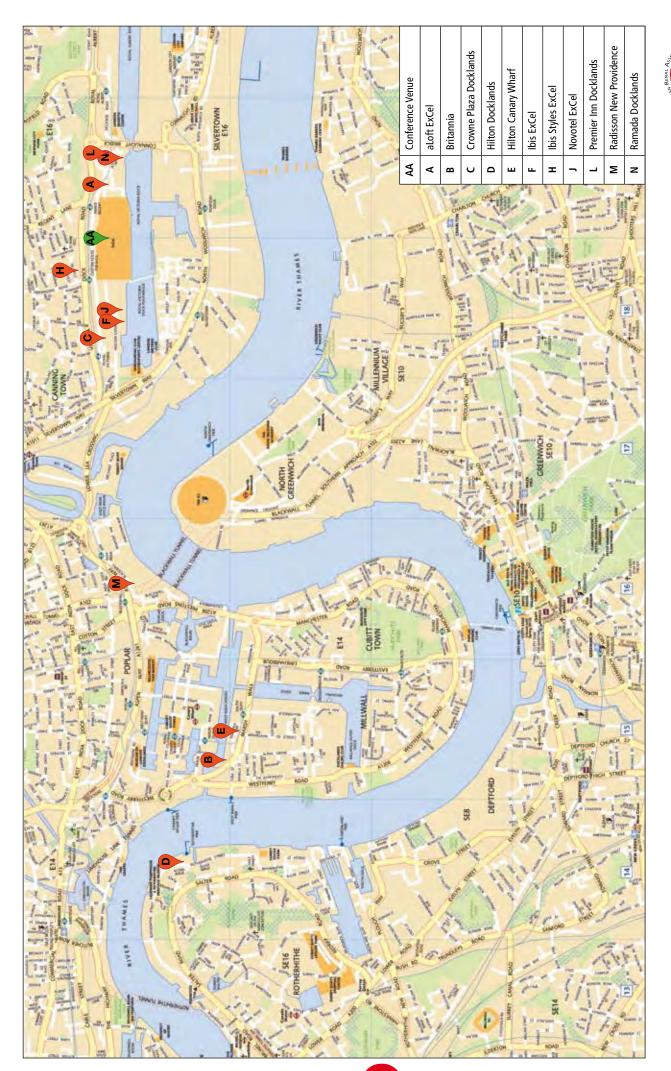
Participants can book their hotel rooms online. After a successful booking, each participant will receive a written confirmation / invoice. Full prepayment by credit card is mandatory. After March 19, 2015 hotel accommodation is subject to availability. After this deadline, a handling fee of EUR 30.00 will be charged.

Changes or cancellations have to be made in writing to Congrex Travel. The hotels will not accept direct changes. Any change of reservation will be subject to a handling fee of EUR 30.00. If your hotel reservation is cancelled until March 19, 2015 the amount paid will be refunded less EUR 60.00 handling fee per room. If your reservation is cancelled after March 19, 2015 or if you arrive later or leave earlier than indicated on your reservation form, the total accommodation amount will be charged and no refunds can be made unless the room can be resold (either by Congrex Travel or the hotel).

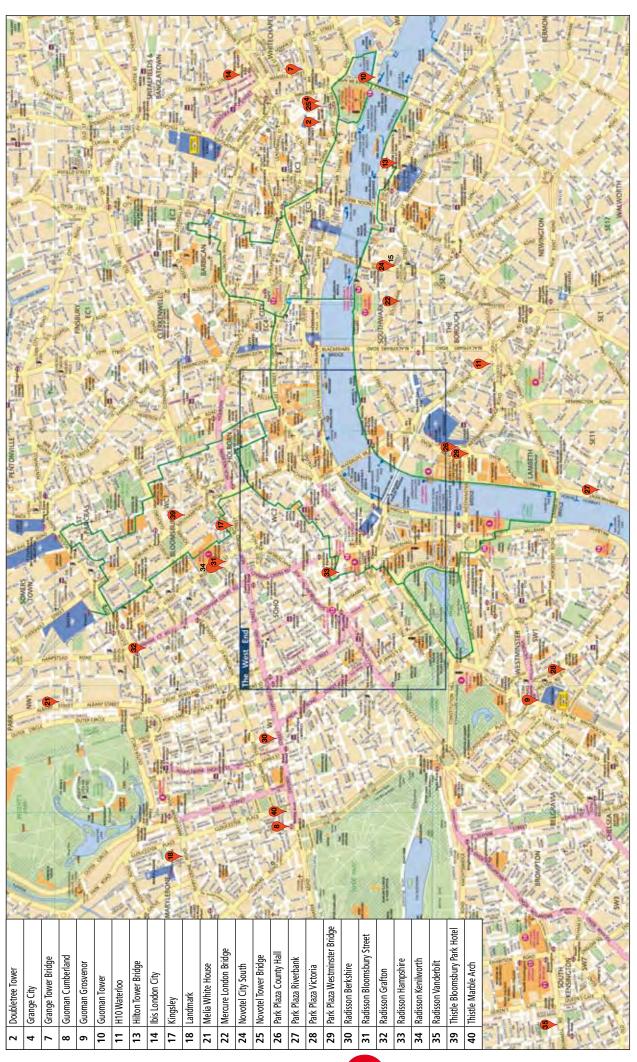
GROUP RESERVATIONS

Group reservations can only be made by special request. Please send your exact request by e-mail: number of rooms, arrival and departure dates, room type (single or double), preferred hotel and / or location and maximum room rate to era-edta.hotel@congrex-switzerland.com. The latest offer with the available hotels will be sent to you within 2 working days following the receipt of your request.















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Hotel name	number / letter on Map	room rate* single use	estimated travel time with public transport to the ExCeL Exhibition Center
0 0.1	4	5 ***** HOTEL	
Grange City	4	€ 330	25 minutes (DLR)
Grange Tower Bridge	7	€ 330	30 minutes (DLR)
Landmark	18	€ 325	45 minutes (Jubilee & DLR)
Radisson Hampshire	33	€ 370 4 **** HOTEL	40 minutes (Northern, Jubilee & DLR)
aLoft ExCel	۸	€ 255	
Britannia	A B	€ 285	connected to the congress center
			15 minutes (DLR)
Crowne Plaza Docklands	С	€ 280	10 minutes walking distance
Doubletree Tower	2	€ 330	25 minutes (DRL)
Guoman Cumberland	8	€ 330	40 - 45 minutes (Central & DLR)
Guoman Grosvenor	9	€ 380	35 minutes (District/Circle & DLR)
Guoman Tower	10	€ 360	30 minutes (DLR)
H10 Waterloo	11	€ 260	30 - 35 minutes (Jubilee & DLR)
Hilton Canary Wharf	Е	€ 415	25 minutes (DLR)
Hilton Docklands	D	€ 275	35 minutes (Jubilee & DLR)
Hilton Tower Bridge	13	€ 470	30 minutes (Jubilee & DLR)
Kingsley	17	€ 365	30 minutes (Central & DLR)
Melia White House	21	€ 255	45 minutes (Bakerloo & Jubilee & DLR)
Mercure London Bridge	22	€ 345	35 minutes (Jubilee & DLR)
Novotel City South	24	€ 325	35 minutes (Jubilee & DLR)
Novotel ExCel	J	€ 310	10 minutes walking distance
Novotel Tower Bridge	25	€ 325	30 minutes (DLR)
Park Plaza County Hall	26	€ 305	35 - 40 minutes (Jubilee & DLR)
Park Plaza Riverbank	27	€ 290	45 minutes (Victoria & Jubilee & DLR)
Park Plaza Victoria	28	€ 305	40 minutes (Victoria & Jubilee & DLR)
Park Plaza Westminster Bridge	29	€ 305	35 - 40 minutes (Jubilee & DLR)
Radisson Berkshire	30	€ 343	40 - 45 minutes (Central & Jubilee & DLR)
Radisson Bloomsbury Street	31	€ 368	40 minutes (Northern & Jubilee & DLR)
Radisson Grafton	32	€ 330	40 minutes (Northern & Jubilee & DLR)
Radisson Kenilworth	34	€ 330	40 minutes (Northern & Jubilee & DLR)
Radisson New Providence	M	€ 318	15 - 20 minutes (DLR)
Radisson Vanderbilt	35	€ 255	40 minutes (Circle line & Jubilee & DLR)
Ramada Docklands	N	€ 265	5 minutes walking distance
Thistle Marble Arch	40	€ 330	40 -45 minutes (Central & DLR)
Thistic Marble Alch	40	3 *** HOTELS	
Ibis ExCel	F	€ 250	10 minutes walking distance
Ibis Styles ExCel	H	€ 210	10 minutes walking distance
Premier Inn Docklands	L	€ 225	5 minutes walking distance
Thistle Bloomsbury Park Hotel	39	€ 315	45 minutes (Piccadilly & Jubilee & DLR)
וווואנופ טוטטווואטעון דמוג חטנפו	Jä	2 ** HOTELS	·
Ibis London City	14	£ 273	30 minutes (DLR)
London Oity		0 270	55 AMINICO (DEII)

^{*}All quoted rates are indicated in EUR and include breakfast, service and taxes.

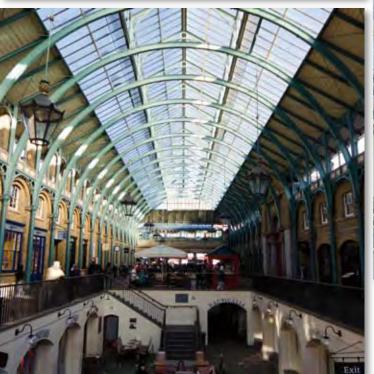
All rates are net rates and are subject to change in case of VAT changes.

Note: this list does not reflect current availability. Up to date information can be found on the official website.



Leading European Nephrology











Important Deadlines

REGISTRATIONS

Late: April 29, 2015

Last minute: April 30 to May 18, 2015

Blank - Name list: May 6, 2015

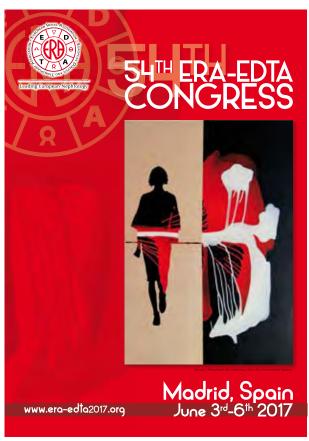
Onsite: from May 27, 2015





Next ERA-EDTA Congresses







ERA-EDTA for You

FRA-FOTA Cogistry



1) Actively be part of the largest and most important Nephrological Society in Europe.

2) Receive its journals NDT (Nephrology Dialysis Transplantation) and CKJ (Clinical

Kidney Journal), the most important nephrological journals in Europe.

3) Participate in its annual congresses, major events attended by nephrologists from all over the world. More than 8,100 delegates participated in the last ERA-EDTA Congress (Amsterdam, The Netherlands - May 31-June 3, 2014). ERA-EDTA members can take

advantage of extremely low early preregistration fees.

4) ERA-EDTA has a diverse and expanding programme of CME Courses throughout Europe. In 2014, 34 events have been organised in many different countries. ERA-EDTA members receive free access to a selection of these courses directly online.



6) The ERA-EDTA Research Programme is an initiative launched in 2009, 3 calls took place till now. Should you wish to





know which projects have been granted from 2009, please visit the Research Programme section of our website www.era-edta. org.

7) The ERA-EDTA Registry (www.era-edta-reg.org) collects, analyses, distributes, reports data on renal replacement therapy in Europe, at congresses, on journals and on a dedicated website. It also teaches CMEs and trains fellows.



8) ERBP (European Renal Best Practice - www.european-renal-best-practice.org): defines the future of European nephrology guidance.

9) Close collaboration between ERA-EDTA and "The Lancet" and "The Lancet Diabetes & Endocrinology". An issue of both journals was devoted to kidney diseases and was published in conjunction with the ERA-EDTA Congress in Amsterdam. Two sessions at the 2014 congress have been organised jointly.



The collaboration has been confirmed for 2015 with a special renal issue scheduled for May 2015 and two symposia at the ERA-EDTA Congress in London).



Leading European Nephrology



10) The ERA-EDTA initiatives for young nephrologists include a number of grants of various kinds: Travel Grants to present free communications or posters at the annual congress, Travel Grants to attend CME Courses, further grants assigned through the National Societies of Nephrology

13) ERA-EDTA cooperates with other major Societies of Nephrology and other medical specialties: special ERA-EDTA sessions are organized at the ASN, ISN, ESPN, ESC, etc.

14) ERA-EDTA has created specific Working Groups to encourage research, communication of knowledge, teaching and to participate in education programmes.

15) ERA-EDTA gives more than 1,300 free online subscriptions to NDT and CKJ to developing countries all over the world through the HINARI programme; furthermore members living in developing countries all over the world pay an extremely low annual membership fee.

based in European countries.

11) All ERA-EDTA members who are younger than 40 years of age can become part of the Young Nephrology Platform (YNP). This new initiative will allow young members to actively participate in the scientific life of the Society.



12) ERA-EDTA has created an educational online journal -NDT-Educational – which is one of the most successful in the nephrological world, with over 100,000 downloads per month. Literature Review is another feature that NDT-Educational offers to its registered users. Experts select and comment the most interesting recent articles related to the various nephrology fields.







Join the Renal Association!

The UK Renal Association (RA) is delighted to welcome you to London to the 2015 ERA-EDTA congress held as a joint meeting with the RA. We have been delighted to work with the ERA-EDTA Scientific Committee to put together a meeting that will showcase both UK and pan-European strengths in renal sciences and clinical research. We have a range of excellent invited lectures and it is a great pleasure to see the UK strongly represented in these.

We have chosen to badge certain sessions with RA leadership to focus on certain areas of work in the UK; these include sessions on Acute Kidney Injury, Rare Renal Diseases, Haemolytic Uraemic Syndrome and T-cell targeted therapies in glomerulonephritis. Taken as a whole the programme has material for every interest and is a great vehicle for your continued education.

London will be at its most welcoming in late May and we wish you a great visit both for the science and the culture!

Bruce Hendry RA President

Bruce Handy

Alison Brown RA Hon Secretary

Alim L. bren

Join the Renal Association!

The Renal Association has always provided strong leadership in informing clinical care and research. However, this requires everyone to contribute and the first step is for you to join the team!



By joining the Renal Association you will:

- Join a renal community of more than 1000 doctors, scientists and multidisciplinary team members throughout the UK
- Have evidence of involvement to support appraisal and revalidation
- Be able to add your voice to RA involvement in all aspects of local and national policy relating to clinical practice in nephrology
- Be able to contribute to all aspects of local and national policy and activity relevant to training, education and research in renal-related medicine and renal science
- Contribute to innovations in staffing models and the new hospital project
- Receive monthly e-news bulletins highlighting key issues and future events
- Receive safety updates relating to kidney patient care
- Obtain discounted fees at the annual RA conference, which showcases the best of UK nephrology research and clinical practice

- Benefit from the RA mentoring scheme for newly appointed consultants
- Be able to join an email network of less than full time (LTFT) workers, to share good practice and ask for advice
- Benefit from one year of free membership if you are a trainee or student
- Contribute to service development and quality improvement projects
- Support the UK Renal Registry as a exemplar of comparative audit and quality improvement
- Access a developing repository of patient information and safety alerts
- Contribute to Clinical Guidelines which are NICE badged
- Register yourself on our Research Database, and access the expertise of other members
- Help lead the development of Renal Service delivery and research
- Contribute and respond to NICE Guidance in the areas of CKD, dialysis and transplantation

The British Association for Paediatric Nephrology (BAPN) was formed in 1972 and was originally a stand alone organisation. In the last decade it was felt that the BAPN would be able to develop paediatric nephrology and represent better the interests of children with renal disease with the support of the much larger organisation the UK Renal Association. The BAPN therefore became a division of the Renal Association in 2010. BAPN members enjoy all the privileges of Renal Association membership. As a smaller community within the Renal Association, all members can feel a part of the association and there are always opportunities to play an active role.





What can you do for ERA-EDTA?

Become a member and start to network **now!**





www.era-edta.org



NDT-EDUCATIONAL

YOUR UPDATED AND RENOVATED TOOL FOR KNOWLEDGE

www.ndt-educational.org www.ndtedu-literaturereview.org



NDT-Educational is the electronic educational journal of ERA-EDTA. The "look" of NDT-Educational has been recently renovated to make it more attractive and user-friendly.

The Editorial Board has been renewed and is happy to welcome several young members, that will help NDT-Educational to move ahead within the current electronic world.

The newsletter, and the related website of NDT-Educational, presents the best lectures given at the annual Congress of ERA-EDTA as well as a selection of free full papers from NDT (Nephrology Dialysis Transplantation), CKJ (Clinical Kidney Journal) and other first class medical journals such as KI (Kidney International), JCI (Journal of Clinical Investigation) and JN (Journal of Nephrology).

Both CME lectures and full papers are open to all registered users (registration is free). Case studies and surveys regarding various aspects of Nephrology are also regularly published.

Two blog sections devoted to nutrition have also recently been added on the website, they are devoted to Nutrition and IgA Nephropathy. More blogs will be opened soon.

A new special Blog has also recently been opened: the "NDT&CKJ

Blog". Some articles selected from NDT and CKJ are discussed by the authors, the Editorial Board and anyone wishing to comment using the user friendly blogging communication system.

"Literature Review" is another feature that NDT-Educational offers to its registered users. Experts select and comment the most interesting recent articles related to the various nephrology fields.

In recent years, NDT-Educational has received > 36,000 visits per month (> 100,000 web pages downloaded) and the journal is regularly sent to more than 12,000 registered colleagues every two weeks. NDT-Educational is especially appreciated in countries where free access to medical literature is limited.

The success of this endeavour is due to the generous, continuous contribution of our Editorial Board Members, all top European nephrologists/investigators, who devote part of their time, despite their many other commitments, to make NDT-Educational a success.

Register for free at www.ndt-educational.org

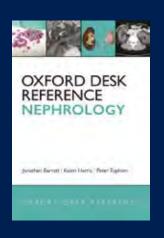
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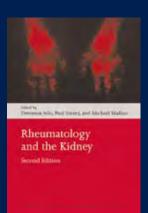
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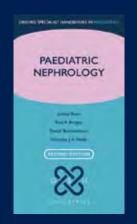


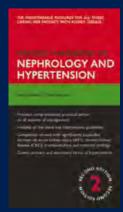
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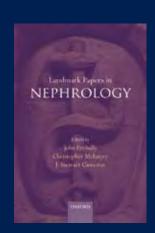
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Leading European Nephrology

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