Dear Colleagues,

You have by now all received an announcement about the many opportunities available to you this spring to participate in advocacy efforts and congressional hill visits on behalf of our society, including the ASPN Capitol Hill Day on May 6th, immediately following the ASPN/PAS Annual Meeting in Baltimore. I encourage all members, as your time and resources permit, to join the ASPN leadership in educating the new government about the public health impact of pediatric kidney disease and advocating for kidney disease research funding. Please click here to read more about how you can make a difference.

Our Committees, as always, have been quite busy, and their updates are summarized in this newsletter. Some of the highlights are:

**Membership Committee**: Affiliate (nursing, social work, child life and nutritionists) membership recruitment and participation in the ASPN is gaining momentum.

**Website Committee**: A new search button has been incorporated in the ASPN website, and the improved Marketplace now lists many job opportunities.

**Program Committee**: Please forward any and all suggestions for themes, speakers, and talks for nephrology-specific or interdisciplinary symposia or workshops for the 2010 ASPN Annual Meeting to Sue Furth (sfurth@jhmi.edu) and Lisa Guay-Woodford (lgw@genetics.uab.edu) by May 1st, 2009.

**Research Committee**: Please stay tuned for updates from our Washington representatives and Research Committee about the additional funds allocated to the NIH under the American Recovery and Reinvestment Act of 2009 (the “Stimulus” package).

The ASPN/PAS Annual Meeting (May 2-5) in Baltimore, Maryland is just around the corner. If you haven't already made your arrangements, please do so now online through the PAS website. The 2009 APSN Program Committee has assembled an outstanding scientific and educational program, including the launching of a lunchtime ASPN Literature Review Workshop! Please click here to learn more about the ASPN Award recipients who will be honored at the meeting. I look forward to seeing you there!

Lisa M. Satlin, MD
President
The emotional costs of doing business better......two years ago when the ASPN moved its day-to-day operations to the Central Office in The Woodlands, the Society made a decision to go to a dues announcement and payment system that would be 100% electronic and developed new policies that would address the long-standing problems we have had with dues non-payment and late payment. Our prior, very personal, system involved an individual mailing, calling, emailing, cajoling our "delinquent" members - that system resulted in over $50,000, in late or lost payments to the society. Our new system has been remarkably successful with over 83% of dues payments received on time. We are actually ahead of budget for dues for the first time ever, another acknowledgment that our past approach, while appropriate for its time, had significant adverse financial consequences for the Society.

However, these positive results have not been accomplished without some angst. A few members have found themselves owing late charges, sometimes because of perceived email problems, sometimes because of local administrative snafus, sometimes for other reasons. Importantly, ASPN staff religiously evaluate "bounced" emails for address changes and when advised in advance of potential problems, have been able to resolve most issues. However, when we are unable to show that electronic transmissions failed and there was no prior contact from the member, we have made the choice to stand firm on our late fees policy in order to be fair to our members whose payments are received on time. This has resulted in a few angry colleagues who feel that we should make exceptions, often noting our "impersonal" responses to this issue. We would like our membership to know that each of these issues has been evaluated and addressed as thoroughly as possible, always with personal involvement of officers of the Society, even though most have not resulted in a relaxation in our policy.

For a society with constantly expanding projects in a time of economic uncertainty, it is important that we maximize our efforts in all these arenas, and we feel that we have made very real progress. But we are also sure we can improve further... if you have thoughts about it, let's talk!

Joseph T. Flynn, MD
Victoria F. Norwood, MD
2009 Founder’s Award Recipients

Drs. Jean E. Robillard and Fred G. Smith, Jr. have been selected to receive the 2009 Founder’s Award. This award is given each year to an ASPN member in recognition of unique and lasting contributions to the field of pediatric nephrology. Drs. Robillard and Smith have both contributed significantly to the ASPN by promoting its activities to assure a continuing role for its members in science as

Jean E. Robillard, MD
Carver College of Medicine
Iowa City, IA

Fred G. Smith, Jr., MD
University of North Carolina
School of Medicine
Durham, NC

2009 Trainee Research Award Recipients

Two awards are given annually at the ASPN meeting: one for best clinical abstract and one for best basic science abstract. This years recipients are listed below.

Clinical Research Awardee
Dagmara Borzych, MD
Sopot, Poland

Basic Research Awardee
Cynthia D’Alessandri-Silva, MD
Yale University Medical School
New Haven, CT

2009 Resident Travel Award Recipients

Each year the ASPN sponsors residents and selected other non-fellow trainees to attend the annual meeting. Stipends to partially support travel as well as complimentary registration are given on a competitive basis. The following are this years recipients:

Brett Ferguson, Children’s Hospital of Michigan
Sujana Gunta, University of Iowa Children’s Hospital
Yolanda Ng, Stony Brook University Hospital
Elaine Ku, University of Southern California/LAC+USC Medical Center
Bryn Tschannen-Moran, U of Southern California/LAC+USC Medical Center
Julia Tzeng, David Geffen School of Medicine at UCLA
Gia Oh, University of California Davis Medical Center
Nilka De Jesus-Gonzalez, University Pediatric Hospital/U of Puerto Rico
Zachary Smith, University of North Carolina at Chapel Hill School of Medicine
Susan Jung, Albert Einstein College of Medicine, Schneider Children’s Hospital
<table>
<thead>
<tr>
<th>Saturday, May 2</th>
<th>Sunday, May 3</th>
<th>Monday, May 4</th>
<th>Tuesday, May 5</th>
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<tr>
<td>8:00am – 10:00am</td>
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<td>8:00am – 10:00am</td>
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<tr>
<td>PAS/ASPN Mini Course</td>
<td>Meet the Professor Breakfast</td>
<td>ASPN/PAS State of the Art Plenary Session</td>
<td>ASPN Symposium</td>
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<tr>
<td>Development of Essential Leadership Skills</td>
<td>8:00am – 10:00am</td>
<td>Developmental Origins of Adult Disease</td>
<td>Proteinuria: Origins and Implications</td>
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<tr>
<td>10:15am – 12:15pm</td>
<td>ASPN Workshop</td>
<td>10:15am – 12:15pm</td>
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<tr>
<td>ASPN Symposium</td>
<td>Business Issues for the Academic Pediatric Nephrologist</td>
<td>ASPN/IPHA/PAS Topic Symposium</td>
<td>ASPN/PAS Topic Symposium</td>
</tr>
<tr>
<td>Acute Kidney Injury</td>
<td>ASPN/IPHA/PAS Topic Symposium</td>
<td>Usefulness of Ambulatory Blood Pressure Monitoring</td>
<td>A Partnership to Surmount the Challenges of Pediatric Drug Development</td>
</tr>
<tr>
<td>7:00am – 8:00am</td>
<td>Meet the Professor Breakfast</td>
<td>12:30pm – 1:45pm</td>
<td>ASPN Awards Luncheon</td>
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<tr>
<td>ASPN Literature Review Workshop</td>
<td>ASPN CPC Fellow’s Luncheon</td>
<td>ASPN Awards Luncheon</td>
<td>12:30pm – 2:30pm</td>
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<tr>
<td>1:00pm – 3:00pm</td>
<td>Battle of the Brains</td>
<td>ASPN Hot Topic Organ Transplantation</td>
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<td>Original Science Abstracts</td>
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<tr>
<td>Nephrology I</td>
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<tr>
<td>3:15pm – 5:15pm</td>
<td>Original Science Abstracts</td>
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<tr>
<td>PAS/ASPN Topic Symposium</td>
<td>Nephrology II</td>
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<tr>
<td>New Insights into the Regulation of Ion Transport in the Aldosterone Sensitive Distal Nephron</td>
<td>3:30pm – 5:30pm</td>
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<tr>
<td>ASPN Presidential Address and Business Meeting</td>
<td>ASPN Presidential Address and Business Meeting</td>
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<tr>
<td>LWPEC/ASPN/PAS Topic Symposium</td>
<td>5:30pm – 7:30pm</td>
<td>ASPN Symposium</td>
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<tr>
<td>Advances in Diabetes: CFRD, Post-Renal Transplant Diabetes and Oxidative Stress</td>
<td>Poster Session II</td>
<td>Renal and Hepatic Cystic Disease: Different Phenotypes, Convergent Pathways</td>
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<tr>
<td>5:30pm – 7:30pm</td>
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<td>Original Science Abstracts</td>
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<td>Poster Session I, Exhibits, Opening Reception</td>
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<td>Hypertension</td>
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<td>4:00pm – 6:00pm</td>
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<td>ASPN Symposium</td>
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<td>The Ckide Study: What Have We Learned So Far?</td>
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<td>8:00pm – 9:00pm</td>
<td>ASPN Member Reception</td>
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<td>Exhibits Open</td>
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<td>5:30pm – 7:30pm</td>
<td>4:00pm – 7:30pm</td>
<td>9:00am – 1:00pm</td>
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# ASPN Ancillary Meetings

<table>
<thead>
<tr>
<th>Meeting</th>
<th>Date</th>
<th>Day</th>
<th>Start Time</th>
<th>End Time</th>
<th>Room</th>
<th>Location</th>
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<tbody>
<tr>
<td>Council Meeting</td>
<td>5/1/09</td>
<td>Friday</td>
<td>12:00 PM</td>
<td>6:00 PM</td>
<td>Hopkins</td>
<td>Baltimore Hilton</td>
</tr>
<tr>
<td>Clinical Affairs Committee</td>
<td>5/2/09</td>
<td>Saturday</td>
<td>7:00 AM</td>
<td>8:00 AM</td>
<td>Calloway B</td>
<td>Baltimore Hilton</td>
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<tr>
<td>John E.Lewy Foundation Board of Directors</td>
<td>5/2/09</td>
<td>Saturday</td>
<td>12:00 PM</td>
<td>1:00 PM</td>
<td>Johnson A</td>
<td>Baltimore Hilton</td>
</tr>
<tr>
<td>Stone and Bone Club</td>
<td>5/2/09</td>
<td>Saturday</td>
<td>1:00 PM</td>
<td>2:00 PM</td>
<td>Poe A</td>
<td>Baltimore Hilton</td>
</tr>
<tr>
<td>Website Committee</td>
<td>5/2/09</td>
<td>Saturday</td>
<td>1:00 PM</td>
<td>2:00 PM</td>
<td>Calloway B</td>
<td>Baltimore Hilton</td>
</tr>
<tr>
<td>Member Reception</td>
<td>5/2/09</td>
<td>Saturday</td>
<td>8:00 PM</td>
<td>9:30 PM</td>
<td>Watertable Ballroom</td>
<td>Renaissance Harboplace</td>
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<tr>
<td>Research Committee</td>
<td>5/3/09</td>
<td>Sunday</td>
<td>7:00 AM</td>
<td>8:00 AM</td>
<td>Chase</td>
<td>Baltimore Hilton</td>
</tr>
<tr>
<td>Program Committee</td>
<td>5/3/09</td>
<td>Sunday</td>
<td>12:00 PM</td>
<td>1:00 PM</td>
<td>Hopkins</td>
<td>Baltimore Hilton</td>
</tr>
<tr>
<td>Membership Committee</td>
<td>5/3/09</td>
<td>Sunday</td>
<td>5:45 PM</td>
<td>6:45 PM</td>
<td>Tilghman</td>
<td>Baltimore Hilton</td>
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<tr>
<td>Public Policy Committee</td>
<td>5/3/09</td>
<td>Sunday</td>
<td>5:45 PM</td>
<td>6:45 PM</td>
<td>Brent</td>
<td>Baltimore Hilton</td>
</tr>
<tr>
<td>Training &amp; Certification Committee</td>
<td>5/3/09</td>
<td>Sunday</td>
<td>5:45 PM</td>
<td>6:45 PM</td>
<td>Hopkins</td>
<td>Baltimore Hilton</td>
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<tr>
<td>Workforce Committee</td>
<td>5/3/09</td>
<td>Sunday</td>
<td>5:45 PM</td>
<td>6:45 PM</td>
<td>Chase</td>
<td>Baltimore Hilton</td>
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<tr>
<td>pFeNA Social Event &amp; Meeting</td>
<td>5/3/09</td>
<td>Sunday</td>
<td>8:00 PM</td>
<td>10:00 PM</td>
<td>TBD</td>
<td>TBD</td>
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<tr>
<td>Development Committee</td>
<td>5/4/09</td>
<td>Monday</td>
<td>7:00 AM</td>
<td>8:00 AM</td>
<td>Stone</td>
<td>Baltimore Hilton</td>
</tr>
<tr>
<td>Member Education Task Force Committee</td>
<td>5/4/09</td>
<td>Monday</td>
<td>7:00 AM</td>
<td>8:00 AM</td>
<td>Tilghman</td>
<td>Baltimore Hilton</td>
</tr>
<tr>
<td>Practice Management Sub-Committee</td>
<td>5/4/09</td>
<td>Monday</td>
<td>7:00 AM</td>
<td>8:00 AM</td>
<td>Hopkins</td>
<td>Baltimore Hilton</td>
</tr>
<tr>
<td>Training Program Directors Committee</td>
<td>5/4/09</td>
<td>Monday</td>
<td>7:00 AM</td>
<td>8:00 AM</td>
<td>Chase</td>
<td>Baltimore Hilton</td>
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<tr>
<td>ASPN &amp; CRD Capital Hill Day Training Session</td>
<td>5/5/09</td>
<td>Tuesday</td>
<td>4:30 PM</td>
<td>5:30 PM</td>
<td>Chase</td>
<td>Baltimore Hilton</td>
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**Announcements**

### New Program Funding

The National Institute of Diabetes & Digestive & Kidney Diseases (NIDDK) is pleased to announce the release of a new program funding announcement titled “Chronic Kidney Disease Biomarker Discovery and Validation Consortium (U01).” The application due date is April 1, 2009. Please be advised that, although not required, a letter of intent is strongly encouraged to be received by KUH by March 4, 2009. The RFA is available at http://grants.nih.gov/grants/guide/rfa-files/RFA-DK-08-015.html.

To request additional information, please contact Dr. Paul Kimmel at KimmelP@EXTRA.niddk.nih.gov.

### Application Solicitations

The organizing committee of the 8th International Symposium on Growth and Nutrition in Chronic Kidney Disease is soliciting applications from junior faculty members (assistant professor and instructors) and fellows in Pediatric Nephrology Programs interested in this field for travel grants, of about $1,000, to the meeting in Oveido, Spain in May 28-30, 2009. Applicants should send a one-page abstract for poster research presentation before March 10th with a support letter from their Division Chiefs. Successful applicants will be notified by the end of March. Please send your application by email to Robert Mak, romak@ucsd.edu.

Robert Mak           Frederick Kaskel
San Diego, CA         New York, New York

### Want to become a better advocate, and make your voice heard on Capitol Hill?

Want to become a better advocate, and make your voice heard on Capitol Hill? Join members of ASPN May 6 for a Hill Day and share your stories and concerns with Members of Congress. In conjunction with our annual meeting in Baltimore, advocacy training will be offered for all ASPN members on May 5 from 4:30 – 5:30 PM before we head to Washington, D.C. To express your interest in participating, please e-mail our Washington representative at eholubowich@dc-crd.com.
The omnibus spending measure consists of the nine fiscal 2009 appropriations bills that mostly fund domestic agencies. Democrats chose not to finish the bills until Bush left office, because he threatened to veto them over their funding levels.

Overall, the discretionary spending package would provide about $19 billion more than Bush requested in his budget for the nine bills almost a year ago. The omnibus would provide about $31 billion more than what was spent on the nine bills in fiscal 2008, an 8 percent boost. It would fund most major domestic departments and also the State Department and some foreign aid programs. Those agencies are currently being funded mostly at fiscal 2008 levels by a continuing resolution (CR) that expires March 6.

The omnibus included $1.911 billion for the National Institute for Diabetes and Digestive and Kidney Diseases, which is $48 million more than last year. Once the omnibus is finished, Congress will turn to work on the FY2010 funding bills. ASPN is once again seeking the inclusion of report language that would build upon previous years’ language by directing NIDDK to initiate two new prospective multicenter pediatric nephrology translational studies or treatment trials over the next two years.

Children’s Health Insurance Program is expanded and extended

On February 4, 2009, the Children’s Health Insurance Program Reauthorization Act of 2009 (CHIPRA) was signed into law by President Obama. CHIPRA reauthorizes the State Children’s Health Insurance Program (SCHIP) for four and half years, and is expected to cover an additional 4 million uninsured low-income children.

This legislation includes dental and mental health coverage for all children enrolled in the program, the option for states to cover pregnant women, new quality initiatives to develop and implement quality measures and improve state reporting of quality data relative to children’s health care, and would expand the program to cover families with incomes up to 300% of the federal poverty level.

This legislation is a similar version of the first bipartisan reauthorization bill vetoed by President Bush.

CMS begins to shape patient education benefit

Section 152(b) of the Medicare Improvements for Patients and Providers Act of 2008 (MIPPA) provides Medicare coverage for Kidney Disease Patient Education Services for individuals with Stage IV chronic kidney disease (CKD). Coverage for these services is designed to provide individuals with comprehensive information regarding the management of comorbidities, prevention of uremic complications, each available option for renal replacement therapy, provide individuals with the opportunity to actively participate in the choice of therapies, and provide information tailored to individual patient needs.

Although this benefit will only be provided to those who treat Medicare beneficiaries with Stage IV CKD, and therefore applicable only to those who treat adults, ASPN has weighed in with CMS so that this patient education program can some day serve as a model for all patients – adults and pediatric patients alike.

A summary of the stakeholder meeting that CMS held in December can be found here: [http://www.cms.hhs.gov/CoverageGenInfo/08_CKD.asp#TopOfPage](http://www.cms.hhs.gov/CoverageGenInfo/08_CKD.asp#TopOfPage).

Submitted by: Katie Schubert, Vice President Cavarocchi Ruscio Dennis Associates, LLC
Committee Updates

PROGRAM COMMITTEE

As the 2009 ASPN Annual Meeting draws near, the ASPN Program Committee is beginning to plan the 2010 ASPN Annual Meeting Program. The members of the 2010 Program Committee include: Susan Furth and Lisa Guay-Woodford (Co-Chairs), Vikas Dharnidharka, Patrick Brophy, Prasad Devarajan, Liz Ingulli, Kevin Meyers, Bill Smoyer and Colin White. We invite the ASPN membership to participate in planning the programming for the 2010 Annual Meeting. We would greatly appreciate if by May 1st, 2009 you could forward to us (sfurth@jhmi.edu or lgw@genetics.uab.edu) your suggestions for themes, speakers, and talks for nephrology-specific or interdisciplinary symposia or workshops. Optimally, symposia are 50% clinical and 50% basic or translational. It would also be ideal if your suggestions could be crafted into the following format (with 4-6 potential speakers/titles per session):

(Presented at the 2008 ASPN meeting):

**Proposed Topic / Session Title:** Pathophysiology of vesicoureteral reflux (VUR)

**Proposed Chair Recommendations:**
Iekuni Ichikawa, Vanderbilt University Medical Center
Carl Bates, Nationwide Children’s Hospital

**Brief Description:** (150 words or less)

Vesicoureteral reflux (VUR) is the most common congenital urogenital abnormality and reflux nephropathy is the 4th leading cause of chronic renal failure in children. The majority of patients with reflux nephropathy have had a history of urinary tract infections. Although VUR follows an autosomal dominant inheritance pattern, the genetics of the disease remains elusive. The first speaker will focus on recent animal models that reveal some of the mechanisms and natural history of VUR. The second speaker will present information on the genetics of VUR, as ascertained by genome wide screening approaches. The third speaker will discuss the findings of a recent clinical trial examining effectiveness of prophylactic antibiotics in patients with a history of VUR and febrile urinary tract infections. The fourth speaker will give an update on current perspectives on the treatment of patients with VUR.

**Target Audience:**
Clinicians and researchers who wish to learn more about the genetics, animal models, and current clinical approaches to managing patients with VUR

**Proposed Topic & Speaker Recommendations:**
1. Using the mouse to understand VUR
   Inga Murawski, Montreal Children’s Hospital Research Institute
2. Genetics of VUR
   Patricia Weng, MD, Mount Sinai Medical Center
3. Effectiveness of antibiotic prophylaxis in patients with VUR and pyelonephritis
   Eduardo H. Garin, MD, Shands Teaching Hospital/University of Florida
4. Vesicoureteral Reflux 2008: Shifting Sands
   Craig Peters, MD, University of Virginia

We greatly value your input and look forward to working with you to assemble an exciting program for 2010!

*The 2010 ASPN Program Committee*
MEMBERSHIP COMMITTEE
Recruitment of affiliate members has been given the green light by offering networking opportunities via email communications to promote interdisciplinary and intradisciplinary exchanges (nursing, social work, child life and nutritionists) concerning pertinent issues to the patients and families our nephrology community serve. In addition, there will be a rotating position on the Program Committee to assist in developing a complementary affiliate program in conjunction with the ASPN meeting starting in 2010. Please encourage those within your divisions or other ancillary staff to join as affiliate members. Open dialogue has already begun to take place on a small scale and further enrollment will strengthen this movement. Interested parties can either join directly through the ASPN website or contact me if more information is desired at susan.massengill@carolinashelsealr.com

Susan Massengill, Chair
ASPN Membership Committee

PUBLIC POLICY COMMITTEE
The American Recovery and Reinvestment Act (ARRA) recently signed by President Obama includes $10.4 billion in two-year, supplemental funding for the National Institutes of Health (NIH). ASPN's Washington representatives last week attended a briefing with Dr. Raynard Kington, NIH Acting Director, where he provided an overview of the agency's evolving plan for distributing this funding to the research community. Click here for a summary of Dr. Kington's remarks.

NIH will hold briefings for the research community as their plan takes shape, though Dr. Kington would not specify the timing of these briefings, or the rollout of the final strategy.

RESEARCH COMMITTEE
The American Recovery and Reinvestment Act (ARRA) includes a $10.4 billion appropriation for the NIH, of which about $8.2 billion is expected to be committed to science research. These funds must be obligated within two years, and are likely to be distributed among three broad categories: 1) meritorious currently pending proposals (primarily R01s) for which progress with only two years of funding is feasible, 2) supplements to existing grants with at least one year remaining, and 3) challenge grants for highly innovative projects, for which new requests for applications (RFAs) are expected.

TWO RECENTLY ISSUED RFAS OF INTEREST TO PEDIATRIC NEPHROLOGISTS INVOLVE THE U01 FUNDING MECHANISM.

On 01/14/2009, the NIDDK issued RFA-DK-08-015, Chronic Kidney Disease Biomarker Discovery and Validation Consortium. According to this announcement, the ideal biomarker can be reliably and reproducibly measured in a minimally invasive way, identifies early stages of disease or correlates with disease prognosis, progression, or response to therapy. Four to seven awards for discovery or validation sites will be funded for five years. Studies of potential biomarkers in animal models of disease are outside the scope of this initiative. Letters of Intent and application receipt dates are 3/4/2009 and 4/1/2009, respectively. Letters of intent are not mandatory and are nonbinding.

RFA-HL-10-004, Childhood Obesity Prevention and Treatment Research Consortium, was issued by the NHLBI and NICHD on 02/02/2009. For obesity prevention, randomized controlled trials targeting pre-schoolers and pre-adolescents are requested. Obesity treatment studies should target overweight or obese pre-adolescents and adolescents with one or more elevated risk factor levels (e.g., type 2 diabetes, hypertension, or dyslipidemia). The NIH anticipates funding two prevention and two treatment trials for seven years. A Research Coordinating Unit will also be funded to coordinate activities between the various studies (see RFA-HL-10-005). Applicants can propose to perform the research coordination functions alone or conduct the clinical trial alone. Letters of Intent and application receipt dates are 9/8/2009 and 10/6/2009, respectively.

The NIH Roadmap promotes multicenter translational studies. A pilot study published on line 2/18/09 by the Nature journal Clinical Pharmacology and Therapeutics <doi:10.1038/cpt.2009.3> suggests that personalized dosing of mycophenolate mofetil (MMF) may help reduce side effects without increasing rejection risks in pediatric renal transplant recipients. Patients with a point mutation in uridine diphosphate-glucuronosyl transferase (UGT1A9-331), the main enzyme responsible for MMF breakdown, metabolized MMF more slowly and were more likely to have leukopenia, but not diarrhea caused by MMF.

The Schwartz equation is getting an update. The new formula to estimate glomerular filtration rate in children will appear in the March issue of the Journal of the American Society of Nephrology. Data was collected from 349 children enrolled in the NIDDK funded Chronic Kidney Disease in children (CKiD) Cohort Study. The new GFR formula generated by the study is based on height, gender, serum creatinine, BUN, and cystatin C.

Teri Mauch, member
ASPN Research Committee

WEB SITE COMMITTEE
A search function has been added to the website. Check out the new and improved marketplace in the Members Only section. Share your suggestions to the website committee by sending an e-mail to info@aspneph.com.

Cheryl Sanchez, Chair
ASPN Website Committee
Welcome New Members!!

Lorraine Bell  
Montreal Children’s Hospital  
Montreal, Quebec

Tammy Brady  
Johns Hopkins University  
Baltimore, MD

Joel Hernandez  
Sacred Heart Medical Center  
Children's Hospital  
Spokane, WA

Gaurav Kapur  
Wayne State University  
Detroit, MI

Christina Kvale  
Seattle Children’s Hospital  
Seattle, WA

Kera Luckritz  
St. Christopher’s Hospital for Children  
Philadelphia, PA

Obioma Nwobi  
Medical College of Georgia  
Augusta, GA

Sharon Su  
Brown University  
Providence, RI

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ASPN Annual Meeting  
May 2-5, 2009 ~ Baltimore, Maryland  
More Information

Pediatric Academic Societies Meeting  
May 2 - 5, 2009 ~ Baltimore, Maryland  
More Information

March 7 - 10, 2009  
More Information

NATIONAL KIDNEY FOUNDATION  
SPRING CLINICAL MEETINGS  
NASHVILLE, TN/MARCH 25-29, 2009  
More Information
1st UAE International Meeting Neurogenic Bladder in Children and Adolescents
ABU DHABI, 7-8 March 2009

ISCD’s 1st Pediatric Bone Densitometry Course
Saturday, March 14, 2009
More Information

Renal Disorders in the Neonate
June 19, 2009

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Medical textbooks are mainly oriented by body systems, disease or diagnosis, yet practicing physicians are confronted with patients’ complaints in the form of symptoms, physical signs or laboratory abnormalities, from which they are expected to reach a diagnosis and proceed with treatment.

This book is meant as a pragmatic text for use at the patient’s bedside. It classifies common clinical symptoms and signs, laboratory abnormalities and issues of management as they present themselves in daily practice. Special emphasis is given to new knowledge that has accumulated on the molecular pathophysiology and molecular genetics of various kidney diseases in order to deepen and strengthen the practical approach to common problems in pediatric nephrology.

Aimed at an audience of general and family practitioners, pediatricians and trainees who are not exposed on a day-to-day basis to pediatric nephrology problems, it provides a logical, concise and cost-effective approach from which they can profit and acquire medical reasoning.

Main Headings

- Glomerular and Vascular Disease
- Urinary Tract Disease/Tubulointerstitial Nephropathy
- Structural/Congenital Abnormalities
- Hypertension
- Tubular Disease
- Fluid/Electrolyte/Acid Base Balance
- Divalent Ion Metabolism
- Renal Failure