Preface

The Renal Research Institute's 12th International Conference on Dialysis, 'Advances in Chronic Kidney Disease 2010', in New Orleans emphasizes recent developments in operational areas, technology, biology of uremia and epidemiology. This year we also celebrate the 10-year anniversary of the New York-Vicenza sistership program, which provides the framework for continuous fruitful co-operation between the Renal Research Institute and Beth Israel Medical Center in New York and the Department of Nephrology, San Bortolo Hospital, Vicenza.

The current issue of *Blood Purification* incorporates many of the papers delivered at the conference.

Michael Brines outlines the potential of erythropoiesis-stimulating agents for tissue protection, which is mediated by a low-affinity erythropoietin receptor different from the one responsible for hematopoiesis.

Treatment of hypertension in dialysis patients is still far from being resolved. In their paper, Josep Redon et al. discuss special considerations for antihypertensive agents in dialysis patients, such as the high prevalence of sympathetic overactivity.

Po Shun Lee et al. describe the potential links between gelsolin, a highly prevalent circulating protein and potential risk indicator that is depleted by inflammatory mediators with low levels being reported in dialysis patients.

Salt is conceived by many as a uremic toxin and Ercan Ok reports on his year-long experience on how to successfully achieve salt restriction in dialysis patients and the outcome of this.

Although cardiac abnormalities are highly prevalent in dialysis patients, myocardial stunning did not receive much attention. Chris W. McIntyre provides novel insights into the pathophysiology of myocardial stunning and additional therapeutic targets.

Exciting new insights into blood-pressure-independent effects of aldosterone on nonepithelial tissues are the focus of the paper by Eberhard Ritz and Nadezda Koleganova.

Chronic inflammation is closely linked to cardiovascular complications of chronic kidney disease (CKD); A.E.M. Stinghen et al. review strategies to modulate immune response and thus improve the course of cardiovascular disease.

Depression is associated with impaired quality of life in CKD; Fredric O. Finkelstein et al. review screening for and therapy of clinical depression in CKD.

John Feehally draws attention to the complex interaction between ethnicity and CKD, and the varied and substantial inequities faced by ethnic minority populations in areas such as renal transplantation.

E. Schepers et al. remind us of the fact that the gut may serve as a source of uremic retention solutes and discuss the potential of intestinal therapeutic interventions to reduce uremic toxin generation and absorption.

Beth Piraino and Heena Sheth present an in-depth literature review comparing the use of automated peritoneal dialysis with Luer lock connection versus continuous ambulatory peritoneal dialysis with a disconnect system in altering the peritonitis risk.

John R. Speakman and Klaas R. Westerterp address in an elegant analysis the 'obesity paradox' in dialysis patients; their results support the idea that relative underdialysis may be responsible for reduced survival in small patients.

Rajesh Mohandas and Mark S. Segal address the significance of endothelial progenitor cells and endothelial vesicles in CKD, in particular their potential as markers of endothelial health.

Much controversy exists on the best way to manage calcium balance in chronic dialysis patients. Based on mathematical models, Frank Gotch et al. support the view that calcium balance is best managed by adjusting dialysate calcium levels.

Congestive heart failure is among the leading causes of death worldwide, and new therapeutic avenues are investigated. Jason G. Andrade et al. review the role of peripheral ultrafiltration in the management of acute decompensated heart failure.

David Humes et al. explore the clinical use of a selective cytopheretic device to treat immunological dysregulation in acute and chronic renal failure.

Regional citrate anticoagulation (RCA) provides an alternative to systemic heparin anticoagulation, and 3 papers in this journal are dedicated to it. Heleen M. Oudemans-van Straaten reports on citrate anticoagulation for continuous renal replacement therapy. Stephan Thijssen et al. describe a novel generic mathematical model of RCA, and Balazs Szamosfalvi et al. describe a methodology to dose venous calcium infusion in RCA.

We hope that you will enjoy the wide range of papers published in this issue of *Blood Purification* and that you will consider attending next year's 13th International Conference on Dialysis, 'Advances in Chronic Kidney Disease 2011'.

Peter Kotanko, New York, N.Y.

Nathan W. Levin, New York, N.Y.

Claudio Ronco, Vicenza