Editorial

The following 9 papers were presented at the NephroPharmacology 7 Workshop on October 10, 2003, in Ulm, Germany. The term nephropharmacology is used to summarize what the kidneys do with drugs (= pharmacokinetics) and what drugs do with the kidneys (= pharmacodynamics). In the past, this subject became clinically apparent because renal impairment was associated with impaired drug elimination (= individual disease). In the future, greater understanding of the genetics and genomics will help to explain individual kinetic and dynamic variability (= pharmacogenomics). This issue of *Kidney Blood Pressure Research* is a continuation of our previous publication practice: (1) *Nieren- und Hochdruckkrankheiten* 1990, 19: 431–518; (2) *European Journal of Clinical Pharmacology* 1993, 44 supplement 1: S1–S68; (3) *Clinical Nephrology* 1995, 43 supplement 1: S1–S46; (4) *International Journal of Clinical Pharmacology and Therapeutics* 1998, 36: 159–175; (5) *Nephrology, Dialysis, Transplantation* 1999, 14 supplement 4: S1–S52; (6) *International Journal of Clinical Pharmacology and Therapeutics* 2003, 41: 450–497.

We think that nephropharmacology can be seen as a prototype for how drug dose individualization can be used to adjust disease and genetically based variability. We will continue to work to improve our knowledge and tools in support of this task.

Frieder Keller, Ulm, March 2004