



Held jointly with the Danish Society of Nephrology

55th ERA-EDTA CONGRESS

Copenhagen

Denmark May 24th - 27th 2018

www.era-edta2018.org



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Main Announcement

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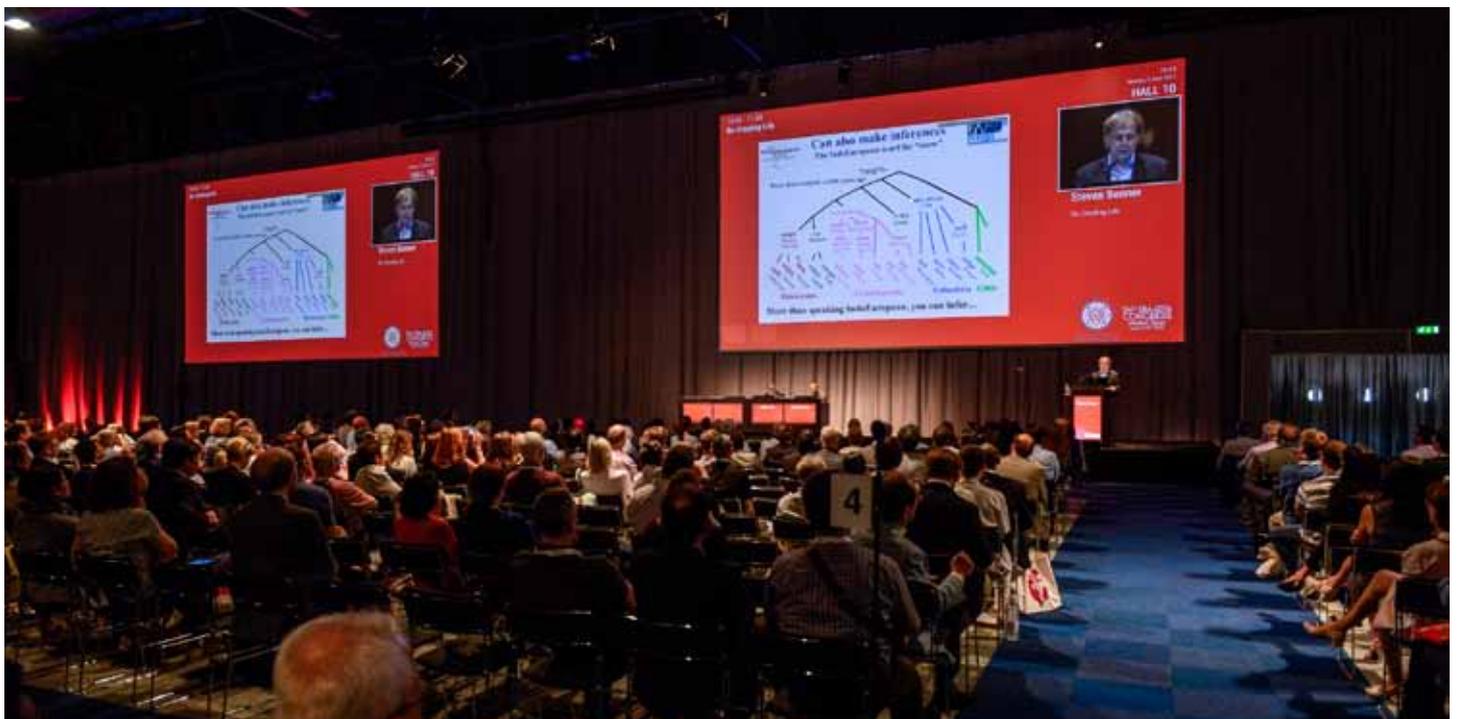
CONGRESS PRESIDENTS

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Dear Colleagues,

In 2002 we last hosted the ERA-EDTA Congress, with great days of education and science. We now aim to make an even better congress, so please do come along and be inspired and excited by a cutting-edge scientific program in an intriguing and friendly atmosphere, all hosted in Copenhagen.

You will most certainly also enjoy Copenhagen with its historical castles and buildings, its arts and fashion and the famous Nordic cuisine with its excellent restaurants. Nyhavn as depicted in this invitation means new harbor, but is in fact quite old. This seeming contradiction bares the quintessence of Copenhagen, and perhaps the ERA-EDTA, tradition and renewal in a vibrant mix, busy but laid back, old but young.

We are looking forward to welcoming you at the ERA-EDTA in Copenhagen 2018!

Bo Feldt-Rasmussen
Congress President



Carmine Zoccali
ERA-EDTA President



SCIENTIFIC PROGRAMME

ERA-EDTA President

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REGISTRATIONS

Early: March 1, 2018
 Blank booking and prepayment (groups only): March 1, 2018
 Late: May 3, 2018
 Blank - name list (groups only): May 9, 2018
 Onsite:from May 4 to May 27, 2018

ABSTRACTS

Submission website open:November 6, 2017
 Abstract submission: January 12, 2018
 LBCT abstract submission: March 16, 2018
 Notification of abstract acceptance/rejection: March 21, 2018

& Congress Timetable

Wednesday, May 23 2018 - REGISTRATION DAY	
11.00 - 19.00	Registrations
Thursday, May 24 2018 - DAY 1	
07.00 - 18.30	Registrations
08.00 - 08.30	Congress Opening
08.30 - 16.30	CME Courses and Working Groups CMEs
17.00 - 18.00	Welcome Ceremony + Plenary Lecture 1
16.00 - 20.00	Exhibition open for visit
18.00 - 19.30	Welcome Reception in the Exhibition
Friday, May 25 2018 - DAY 2	
07.30 - 18.30	Registrations
08.00 - 09.30	Symposia
09.30 - 10.45	Poster Session and Coffee Break
10.45 - 11.30	Plenary Lecture 2
11.45 - 13.15	Symposia
13.15 - 14.45	Industry Symposia
15.00 - 16.30	Symposia
16.30 - 17.00	Poster session, coffee break and exhibition visit
17.00 - 18.30	Symposia
09.30 - 17.30	Exhibition open for visit
Saturday, May 26 2018 - DAY 3	
07.30 - 18.30	Registrations
08.00 - 09.30	Symposia
09.30 - 10.45	ERA-EDTA General Assembly
	Poster Session and Coffee Break
10.45 - 11.30	Plenary Lecture 3
11.45 - 13.15	Symposia
13.15 - 14.45	Industry Symposia
15.00 - 16.30	Symposia
16.30 - 17.00	Poster session, coffee break and exhibition visit
17.00 - 18.30	Symposia
09.30 - 17.30	Exhibition open for visit
Sunday, May 27 2018 - DAY 4	
07.30 - 14.30	Registrations
08.00 - 09.30	Symposia
09.45 - 10.30	Plenary Lecture 4
10.45 - 12.15	Symposia
12.30 - 14.00	Nephrology Pearls

PLENARY LECTURES

- 1) Gene editing: powerful new tool for nephrology research and therapy
Toni Cathomen, Freiburg, Germany
- 2) New paradigms of the kidney - Vascular-Bone axis in CKD
Klaus Olgaard, Copenhagen, Denmark
- 3) From the RNA world to the clinic: RNAs as drugs and drug targets
Bruce Sullenger, Durham, USA
- 4) Epidemiology of kidney disease
Marcello Tonelli, Calgary, Canada

MINI LECTURES

Oxygen sensing – from physiology to clinical application
Kai-Uwe Eckardt, Berlin, Germany

New ideas on the link between salt and hypertension
Friedrich C. Luft, Berlin, Germany

Current place of vaptans in the treatment of hyponatremia
Goce Spasovski, Skopje, F.Y.R. of Macedonia

MicroRNAs, mediators and therapeutic targets for renal disease
Laura Denby, Edinburgh, United Kingdom

Economics of ADPKD: cost-effectiveness of medical treatment?
Jonathan G. Fox, Glasgow, United Kingdom

Role of Wnt signaling in renal fibrosis
Speaker to be confirmed

The new standardized classification of glomerulonephritis
Sanjeev Sethi, Rochester, U.S.A.

Treatment of C3 glomerulopathy
Yasar Caliskan, Istanbul, Turkey

Treatment of complement related glomerulopathies including HUS
Giuseppe Remuzzi, Bergamo, Italy

Treatment of HCV in CKD/ESRD: challenges and opportunities
Michel Jadoul, Brussels, Belgium

Changing face of HIV related kidney disorders
Alberto Ortiz, Madrid, Spain

Liquid kidney biopsy
- Yes! We are there
Harald Mischak, Hannover, Germany
- No, at least by now
Kerstin Amann, Erlangen, Germany

The diagnosis of hematuria in the genetic era: a conundrum solved?
Emmanuelle Plaisier, Paris, France

ANCA-associated vasculitis: should it be split into (at least) two diseases?
Benjamin Terrier, Paris, France

Biomarkers in IgA nephropathy
Dita Maixnerova, Prague, Czech Republic

Frailty in CKD/ESRD
Dimitrios Goumenos, Patras, Greece

How to increase serum Klotho concentration?
Makoto Kuro-o, Shimotsuke, Japan

FGF23 as a predictor of cardiovascular outcomes in CKD
Martin De Borst, Groningen, The Netherlands

Gut-microbiota in immune-mediated inflammatory diseases
Loreto Gesualdo, Bari, Italy

Factors affecting adherence in CKD
Anna Birna Almarsdóttir, Copenhagen, Denmark

Challenges and opportunities in the conduct of clinical trials in nephrology
Adeera Levin, Vancouver, Canada

Inflammation as a driver of premature aging in CKD
Peter Stenvinkel, Stockholm, Sweden

Atrial fibrillation in ESRD - what is the best approach to treatment
Adrian Covic, Iasi, Romania

Milestones in hyperkalemia therapy or just an innovation
Ziad Massy, Paris, France

Aldosterone inhibition in ESRD patients
Patrick Rossignol, Vandoeuvre-Les-Nancy, France

Resistant hypertension in ESRD - is it just water that matters?
Francesca Mallamaci, Reggio Calabria, Italy

Implementation of new CKD-MBD guidelines
Markus Ketteler, Coburg, Germany

Neprilysin inhibition in heart failure and CKD - a double-edged sword?

Richard Haynes, Oxford, United Kingdom

Renal anemia of inflammation

Yalcin Solak, Sakarya, Turkey

What can the Danish Nephrology Registry teach us?

James Heaf, Roskilde, Denmark

Impact of transitioning between modalities: the INTEGRATED project

Wim Van Biesen, Ghent, Belgium

Clinical implications of peritoneal transport physiology

Olof Heimbürger, Stockholm, Sweden

New clinical trials on kidney transplantation

Josep Cruzado, Barcelona, Spain

Xenotransplantation - a realistic solution?

Speaker to be confirmed

Criteria to define transplantable kidneys

Giuseppe Grandaliano, Foggia, Italy

How do we treat diabetic patients in stage 4-5 CKD

Speaker to be confirmed

Bariatric surgery and kidney functions

Speaker to be confirmed

The presence and the future of antihypertensive therapy

Giuseppe Mancia, Milan, Italy

AKI in the patient with cirrhosis

Andrew Davenport, London, UK

Staging AKI: from RIFLE to KDIGO to Delta-creatinine?

Norbert H. Lameire, Ghent, Belgium

CI-AKI: are the contrast agents really harmful?

Jolanta Malyszko, Bialystok, Poland

Using digital and mobile tools in clinical research

Mitchell R. Lunn, San Francisco, USA

News in the antique concept of Morbus Dominorum: gout as disease of lords

Vincenzo Savica, Messina, Italy

in collaboration with the International Association for the History of Nephrology (IAHN)



SYMPOSIA

SPECIAL AND JOINT SYMPOSIA

Late breaking clinical trials

ERA-EDTA Registry

- Trends in the Kidney Donor Risk Index (KDRI) in Europe
Maria Pippias, Amsterdam, The Netherlands
- The European EDITH kidney patients survey on treatment modality choice
Rianne de Jong, Amsterdam, The Netherlands
- Nutritional status in advanced CKD (EQUAL)
Speaker to be confirmed
- European disparities in access to transplantation and graft failure in children
Marjolein Bonthuis, Amsterdam, The Netherlands



American Society of Nephrology (ASN) Highlights



ERA-EDTA and Japanese Society of Nephrology (JSN)

Acute/rapidly-progressive nephritic syndrome and vasculitis

- Japanese Renal Biopsy Registry (JRBR)
Hitoshi Sugiyama, Okayama, Japan
- A nation-wide prospective cohort study in Japanese patients with ANCA-associated vasculitis
Shinya Kaname, Tokyo, Japan
- Geographical difference – different incidence of glomerular disease or different practice
Loreto Gesualdo, Bari, Italy
- Complications after renal biopsy - what are the risk factors?
Bjorn Peters, Skövde, Sweden



ERA-EDTA and Chinese Society of Nephrology (CSN)



ERA-EDTA and European Society of Hypertension (ESH)



ERA-EDTA and European Society for Paediatric Nephrology (ESPN)



Track 1

FLUID & ELECTROLYTES, TUBULAR TRANSPORT, RENAL PHYSIOLOGY

Renal physiology - tubular transport

- Claudins in the distal nephron
Speaker to be confirmed
- Tubular handling of calcium and magnesium:
Insights from GWAS
Olivier Devuyst, Zürich, Switzerland
- HNF1beta: roles in the distal nephron
Stanislas Faguer, Toulouse, France

Mitochondria: critical players in kidney disorders

- Podocyte metabolism in health and disease
Tobias Huber, Hamburg, Germany
- Mitochondrial cytopathies and the kidney
Francesco Emma, Rome, Italy
- Mitochondrial dysfunction in AKI
Ariela Benigni, Bergamo, Italy

APOL1 impact in kidney disease

- Pathogenic roles of lipoproteins and apolipoproteins in kidney diseases
Arnold Von Eckardstein, Zürich, Switzerland
- The APOL1-associated spectrum of chronic kidney disease
Barry I. Freedman, Winston-Salem, U.S.A.
- A mouse model of APOL1-associated kidney disease
Speaker to be confirmed

Track 2

HEREDITARY DISORDERS, DEVELOPMENT, PREGNANCY, PAEDIATRIC NEPHROLOGY

Recent findings in ADPKD

- Utility of prognostic scores in ADPKD
Emilie Cornec-Le Gall, Brest, France
- Low-osmolar diet and adjusted water intake in ADPKD
Albert Ong, Sheffield, United Kingdom
- New genes for cystic kidneys and liver
Peter Harris, Rochester, U.S.A.
- Use of urine peptidome analysis in ADPKD
Giovambattista Capasso, Naples, Italy

Paediatric nephrology

- Long-term outcome of patients with Lowe syndrome and Dent disease 2
Detlef Bockenhauer, London, United Kingdom
- Primary disease recurrence - effects on paediatric renal transplantation outcomes
Speaker to be confirmed
- Methylmalonic aciduria (MMA): new therapeutic perspectives
Speaker to be confirmed
- Minimal Change Disease
Marina Vivarelli, Rome, Italy

Pregnancy, CKD and hypertension

- The role of antihypertensive treatment in pregnant women with diabetic nephropathy
Elisabeth R. Mathiesen, Copenhagen, Denmark
- The role of home blood pressure measurements in pregnancy complicated by hypertension
Marianne Vestgaard, Copenhagen, Denmark
- Preconception cardiovascular risk factors for gestational hypertension and preeclampsia
Speaker to be confirmed
- Preeclampsia - does it predict kidney and cardiovascular disease in the future
Speaker to be confirmed
- Complement activation in kidneys; more than just a signature of IgG deposition
Cees Van Kooten, Leiden, The Netherlands



Track 3

GLOMERULAR DISEASES AND GENERAL CLINICAL NEPHROLOGY

Membranous nephropathy: the evolving story

- Advances in the pathogenesis of membranous nephropathy
Pierre Ronco, Paris, France
- Membranous nephropathy and cancer
Rolf A.K. Stahl, Hamburg, Germany
- New perspectives from recent treatment trials in membranous nephropathy
Jack F.M. Wetzels, Nijmegen, The Netherlands

IgA nephropathy: from genes to therapeutic controversies

- From genetics to pathophysiology
Jan Novak, Birmingham, U.S.A.
- Towards pathology-based therapy? Towards a personalized therapy in IgAN
Rosanna Coppo, Turin, Italy
- From experimental models to new treatment options in humans
Renato Monteiro, Paris, France
- New and next therapeutic approaches
Jürgen Floege, Aachen, Germany

Plasma cell dyscrasias and the kidney

- Myeloma cast nephropathy - any role for extracorporeal treatments?
Frank Bridoux, Poitiers, France
- Primary amyloidosis - current best practices
Romana Rysava, Prague, Czech Republic
- Randall-type monoclonal immunoglobulin deposition disease
Camille Cohen, Paris, France
- MGUS and glomerulonephritis - how to find a causal relationship and how to treat
Sanjeev Sethi, Rochester, U.S.A.

Rituximab in immune mediated glomerular diseases: one drug does not fit all

- Anti-B cell targeted therapy: anti CD20 and other approaches
Annette Bruchfeld, Stockholm, Sweden
- Rituximab in idiopathic membranous nephropathy
Pierre Ronco, Paris, France
- Rituximab in IgA nephropathy
Fernando Fervenza, Rochester, USA
- Rituximab in ANCA vasculitis
David Jayne, Cambridge, United Kingdom

Lupus and vasculitis - recent advances in therapy

- Newer agents in the treatment of SLE nephritis
David Jayne, Cambridge, United Kingdom
- Anti-GBM disease - New subgroups and novel therapies
Mårten Segelmark, Linköping, Sweden



- IgA Vasculitis in adults: what is it and what should we do about it?

Alan D. Salama, London, United Kingdom

- Improving survival in ANCA associated vasculitis

Wladimir M. Szpirt, Copenhagen, Denmark

Glomerular diseases in the Omics era

- Large-scale genomic studies: what they have taught us
Alexander Teumer, Greifswald, Germany
- An integrated view of glomerular pathology
Tobias Huber, Hamburg, Germany
- Transcontinental Omics studies
Xueqing Yu, Guangzhou, P.R. China
- Integrative omics approach for comprehensive IgA nephropathy
Francesco Paolo Schena, Bari, Italy

Track 4

CKD - PATHOPHYSIOLOGY, EPIDEMIOLOGY, PREVENTION, PROGRESSION, AGEING

Update in plasmapheresis for treating kidney diseases

- Thrombotic thrombocytopenic purpura/hemolytic uremic syndrome
Petar Kes, Zagreb, Croatia
- Renal transplantation
Paolo Malvezzi, Grenoble, France
- Anti-neutrophil cytoplasm antibodies-associated vasculitis
Charles Pusey, London, United Kingdom
- FSGS - soluble or solid?
Mario Schiffer, Hannover, Germany

Progression of chronic kidney disease - hot issues beyond blood pressure and renin-angiotensin system

- Can antidiabetic drugs prevent chronic kidney disease progression?
Christoph Wanner, Würzburg, Germany
- Interventional antihypertensive therapies and chronic kidney disease - a new window of opportunity?
Johannes F.E. Mann, Munich, Germany
- Does metabolic acidosis correction prevent chronic kidney disease progression?
Marcin Adamczak, Katowice, Poland
- Hyperuricemia and chronic kidney disease progression
Ivan Rychlik, Prague, Czech Republic

New biomarkers of CKD progressions

- A new role for suPAR?
Jack F.M. Wetzels, Nijmegen, The Netherlands
- Phosphate toxicity and CKD progression
Markus Ketteler, Coburg, Germany
- Clinical consequences of hypervolemia in CKD patients
Andrzej J. Wiecek, Katowice, Poland
- Klotho and endocrine FGFs – marker of CKD progression and cardiovascular complications?
Makoto Kuro-o, Shimotsuke, Japan

Interstitial fibrosis and mechanisms of CKD progression

- New concepts in the pathogenesis of interstitial fibrosis
Peter Boor, Aachen, Germany
- Are there early biomarkers of interstitial fibrosis?
Christos Chatziantoniou, Paris, France
- The role of hypoxia in the progression of polycystic kidney disease
Kai-Uwe Eckardt, Berlin, Germany
- Interstitial fibrosis in kidney transplant recipients
Marian Klinger, Wroclaw, Poland

Controversy: too much Nephrology?

- The CKD epidemics is overstated
- The CKD epidemics is real and concerning

Focus on surrogate end-points in Nephrology

- Clinical end-points in Nephrology: less simple than it may seem
Kitty J. Jager, Amsterdam, The Netherlands
- Proteinuria as a clinical end-point in clinical trials in Nephrology: acceptable but not perfect
Ron T. Gansevoort, Groningen, The Netherlands
- Coronary calcification as a cardiovascular end-point in clinical trials in nephrology: lights and shades
Gérard London, Fleury-Mérogis, France

CKD as a public health priority: organizational models

- CKD Epidemiology in 2017-2050: primary and secondary prevention
Marcello Tonelli, Calgary, Canada
- Individualised care for kidney disease without hospital-based clinics?
Charles Tomson, Bristol, United Kingdom
- Integrated clinical care for CKD
Adeera Levin, Vancouver, Canada

n-3 PUFA in CKD: does it matter?

- n-3 PUFA and CKD: epidemiological data and follow-up
Anupam Chandra, Oslo, Norway
- Arrhythmias and sudden cardiac death in dialysis patients: is n-3 PUFA of relevance?
Jesper Moesgaard Rantanen, Aalborg, Denmark
- n-3 PUFA, inflammation and fibrosis. New insights
Ivar Anders Eide, Lørenskog, Norway
- n-3 PUFA and interventional studies relevant for the nephrologist
My Svensson, Lørenskog, Norway



CKD - new therapeutic approaches

- New treatments in diabetic kidney disease
Peter Rossing, Gentofte, Denmark
- Blood pressure regulation in CKD stage 1-5 (non-dialysis). Achievement of treatment goals and adherence to treatment
Niels Henrik Buus, Aarhus, Denmark



- Multifactorial risk reduction in CKD - with or without diabetes
Rikke Borg, Roskilde, Denmark
- The New Nordic Renal Diet
Louise Salomo, Copenhagen, Denmark

Track 5

END-STAGE RENAL DISEASE, HAEMODIALYSIS

Scheduling dialysis and hemodiafiltration in 2018: a new portfolio?

- Daily and frequent dialysis schedules: rationale, logistics and outcomes
Nicholas Selby, Derby, United Kingdom
- Incremental dialysis
Andrew Davenport, London, United Kingdom
- High convective volume in hemodiafiltration: an open question
Francesco Locatelli, Lecco, Italy

The non-dialysis pathway in ESRD

- Palliative care in ESRD: an overview
Aine Burns, London, UK
- End-of-life perspectives in haemodialysis
Stefan H. Jacobson, Stockholm, Sweden
- The non-dialysis pathway: models of care
Elizabeth Krarup, Herlev, Denmark
- Patient-reported outcome measures in ESRD: relevance for renal palliative care
Karl-Göran Prütz, Helsingborg, Sweden



Uremic toxicity - New insights

- Uremic toxins and the gut
Griet Glorieux, Ghent, Belgium
- Uremic toxins and cardiovascular outcomes
Ziad Massy, Paris, France
- Uremic toxins and the bone in CKD
Tilman Drueke, Villejuif, France
- Role of inflammation in the uremic phenotype
Peter Stenvinkel, Stockholm, Sweden

New methods of anaemia management in CKD patients

- PHIs - safety and efficacy - results from recent clinical trials
David Wheeler, London, United Kingdom
- Iron supplementation in CKD patients – what is the optimal dose and route of administration in 2018?
Iain C. Macdougall, London, United Kingdom
- Mechanisms of hypertension induced by erythropoietin and related agents
Speaker to be confirmed
- What is the future of rHuEPO?
Francesco Locatelli, Lecco, Italy

Neurologic disturbances in CKD

- Acute and chronic cognitive changes in CKD
David Goldsmith, London, United Kingdom
- Sleep disturbances in ESRD
Claire Kennedy, Dublin, Ireland
- Headaches during haemodialysis - headaches and treatment
Speaker to be confirmed

Cardiovascular calcifications in CKD

- Pathophysiology of vascular calcification
Mario Cozzolino, Milan, Italy
- Vitamin K in CKD patients
Jürgen Floege, Aachen, Germany
- Calcium sensing receptors
Jordi Bover, Barcelona, Spain
- Energy-dense diets and vascular calcification
J. Mariano Rodriguez Portillo, Cordoba, Spain

Treatment of CKD-MBD

- Are all phosphate binders the same for CKD patients?
João M. Frazão, Porto, Portugal
- Calcimimetics or vitamin D derivatives in ESRD patients?
John Cunningham, London, United Kingdom
- Osteoporosis in patients with CKD
Marie-Hélène Lafage-Proust, St. Etienne, France
- Treatment and prevention of fractures in kidney graft recipients
Rudolf Wüthrich, Zürich, Switzerland

The diagnosis of Heart Failure in End Stage Kidney Disease (ESKD): a lingering dilemma

- Diagnosis, classification and staging in Medicine: methodology issues
Speaker to be confirmed
- Acute and chronic heart-kidney interactions
Claudio Ronco, Vicenza, Italy
- Can the ESC guidelines for diagnosis of heart failure be applied among CKD patients?
Vincent Brandenburg, Aachen, Germany

DOPPS - The sweet truth: Optimizing care in advanced CKD and dialysis with a focus on diabetic patients



- DOPPS Program: The burden of diabetes in advanced CKD and dialysis
Bruce Robinson, Ann Arbor, USA
- PDOPPS: Variation in the PD prescription, glucose exposure and outcomes
Mark Lambie, Stoke-On-Trent, United Kingdom
- DOPPS: Hepatitis C in HD patients - prevalence trends over 20 years, outcomes and use of newer treatments
Michel Jadoul, Brussels, Belgium
- CKDopps: Diabetes treatment, control and hypoglycemia in patients with advanced CKD
Bénédicte Stengel, Villejuif, France

- EURODOPPS: Outcomes according to different strategies of HbA1c use among diabetic HD patients
Ionut Nistor, Iasi, Romania

Track 6

HOME THERAPIES, PERITONEAL DIALYSIS

Lessons from International Databases

In collaboration with

the International Society for Peritoneal Dialysis (ISPD)



- SONG-PD
Karine Manera, Sydney, Australia
- Achieving optimal catheter function. Early insights from PDOPPS and UK-Catheter Study
Martin Wilkie, Sheffield, United Kingdom
- An update from the IPDN (International Paediatric Dialysis Network)
Franz Schaefer, Heidelberg, Germany

Optimising clinical outcomes and technique survival

- How to reduce technique failure due to peritonitis - the ANZDATA experience
Speaker to be confirmed
- The role of training in peritonitis prevention - what we have learned from the PEPS Study (Prevention of Peritonitis in Peritoneal Dialysis)
Susanne Ljungman, Gothenburg, Sweden
- What is the role of assisted PD in the outcomes of frail elderly patients?
Edwina Brown, London, United Kingdom

Optimising fluid management in PD patients

- Bioimpedance: what have we learned from the IPOD-PD Study
Wim van Biesen, Ghent, Belgium
- Managing blood pressure in PD patients: what is the optimal balance between bioimpedance directed volume status, salt restriction, pharmacological management and sodium removal?
Olof Heimbürger, Stockholm, Sweden
- What is the role of low sodium solutions?
Speaker to be confirmed

Home haemodialysis in Europe 2018

- What to do for more frequent use of home haemodialysis in Europe
Speaker to be confirmed
- Home haemodialysis and control of phosphatemia
Antonio Bellasi, Milan, Italy
- Home haemodialysis and quality of life
Edwina Brown, London, United Kingdom

Track 7

TRANSPLANTATION AND IMMUNOLOGY

Hot and new in transplantation: selected topics from 2017/18

- Relevant outcomes? The SONG Initiative (Standardized Outcomes In Nephrology)
Lionel Rostaing, Grenoble, France
- Steroid withdrawal: if and when?
Maria Haller, Linz, Austria
- Do we still need calcineurin inhibitors in 2018?
Daniel Abramowicz, Antwerp, Belgium
- Dialysis vintage and outcomes
Rainer Oberbauer, Vienna, Austria

Humoral immunity (HLA and nonHLA)

- Allorecognition revisited
Frans H.J. Claas, Leiden, The Netherlands
- Histopathology of humoral alloimmunity
Jan Becker, Cologne, Germany
- Anti-HLA antibodies - consequences and intervention
Speaker to be confirmed
- Sensitization to non-HLA epitopes - is this clinical relevant?
Georg Böhmig, Vienna, Austria

Expanding the donor pool (deceased and live donors) KPD, ABOi, machine perfusion

- How to set up a KPD Program
Ondrej Viklicky, Prague, Czech Republic
- ABO-I and HLA-I transplantation
Umberto Maggiore, Parma, Italy
- DCD - Programs
Speaker to be confirmed
- Marginal kidney donors
Johan W. De Fijter, Leiden, The Netherlands

Post transplantation diabetes mellitus - relation to obesity and new options/challenges

- Peripheral or central resistance-pre and post transplant factors in PTDM
Morten Buus Jørgensen, Copenhagen, Denmark
- Insulin secretion and immunosuppression related pathogenesis of PTDM
Trond Jenssen, Oslo, Norway
- New gastrointestinal hormones for glucose control in obesity and type 2 diabetes - any role in diabetes after transplantation?
Tina Vilsbøll, Copenhagen, Denmark
- Clinical evolution of PTDM
Esteban Porrini, La Laguna, Spain



Risk profiling in renal transplant patients

- Metabolic risk profile in renal transplant candidates and in renal transplant patients
Umberto Maggiore, Parma, Italy
- CV risk in potential renal transplant recipients
Alan Jardine, Glasgow, UK
- Nocturnal hypertension and renal function loss in renal transplant patients
George Reusz, Budapest, Hungary

Track 8

HYPERTENSION, DIABETES, VASCULAR DISEASES

Hot topics in hypertension

- Early vascular aging, hypertension and cardiovascular disease
Stéphane Laurent, Paris, France
- Looking for optimal target blood pressure: implications of the recent trials
Sverre E. Kjeldsen, Oslo, Norway
- Measuring, analyzing and managing drug adherence
Michel Burnier, Lausanne, Switzerland
- Potential new targets for antihypertensive therapy
Krzysztof Narkiewicz, Gdansk, Poland

A new life for sodium in Nephrology

- Sodium and ADPKD progression
Vicente Torres, Rochester, U.S.A.
- Sodium and the evolution of CKD
Gerjan Navis, Groningen, The Netherlands
- Proteasuria – the primary mechanism for sodium retention in proteinuric kidney disease
Ferruh Artunc, Tübingen, Germany

Diabetic nephropathy

- Urine proteome - is there a role in predicting and monitoring diabetic nephropathy
Peter Rossing, Gentofte, Denmark
- SGLT2 inhibitors, mechanisms behind cardiovascular and renal protection?
Bo Feldt-Rasmussen, Copenhagen, Denmark
- Incretin based therapies, mechanisms behind cardiovascular and renal protection?
Johannes F.E. Mann, Munich, Germany
- Ongoing studies in the field
Speaker to be confirmed



Track 9

ACUTE KIDNEY INJURY AND INTENSIVE CARE NEPHROLOGY

AKI biomarkers and risk factors

- Novel biomarkers for prediction/detection of AKI
Danilo Fliser, Homburg/Saar, Germany
- Leukocyte integrin CD11b/CD18
Speaker to be confirmed
- NETs and histones, new players in AKI and AKI-related remote organ injury
Hans-Joachim Anders, Munich, Germany
- Biomarkers for early detection and prognosis of AKI
Raymond Vanholder, Ghent, Belgium

AKI in various circumstances

- AKI in the intensive care unit
Michael Joannidis, Innsbruck, Austria
- AKI after kidney transplantation
Alexandre Hertig, Paris, France
- AKI during disasters
Mehmet Sukru Sever, Istanbul, Turkey
- Consulting the patient with AKI in other clinics: what should be stressed by the nephrologist?
Mustafa Arici, Ankara, Turkey

Renal Replacement Therapy in the Intensive Care Unit

- Renal replacement therapy indications in patients with severe AKI in ICU
Julien Maizel, Amiens, France
- Continuous Renal Replacement Therapy
Esteban Poch López de Briñas, Spain
- Pro RRT Delayed strategy
Stéphane Gaudry, Colombes, France
- Con RRT Delayed strategy
Melanie Meersch, Münster, Germany

SPECIAL SESSION

Nephrology Pearls

CME COURSES

IWG -

Immunonephrology Working Group News in the pathogenesis and treatment of immune-mediated renal diseases



Part 1

Cyclophosphamide in glomerular disease: is this old drug still to be used or does it have to be dismissed?

- Introduction and the case of ANCA-associated vasculitis
Yasar Caliskan, Istanbul, Turkey
- The case of lupus nephritis
Vladimir Tesar, Prague, Czech Republic
- The case of membranous nephropathy
Jack F.M. Wetzels, Nijmegen, The Netherlands
- Minimal change disease - Focal glomerulosclerosis
Claudio Ponticelli, Milan, Italy

Part 2

Renal involvement in rare inflammatory diseases

- IgG4-related renal disease
Giacomo Quattrocchio, Turin, Italy
- Inflammation in crystal nephropathies
Hans-Joachim Anders, Munich, Germany
- Renal involvement in Familial Mediterranean Fever and Systemic Autoinflammatory Diseases
Speaker to be confirmed
- Renal involvement in scleroderma
Speaker to be confirmed



(EURECA-m Working Group - European Renal and Cardiovascular Medicine) The challenge of decreasing cardiovascular mortality in CKD

Part 1

New therapeutic approaches to improve cardiovascular outcomes in CKD patients

- Challenges and opportunities of potassium management in CKD and hypertension
Patrick Rossignol, Vandoeuvre-Les-Nancy, France
- Cardio- and nephroprotective properties of SGLT-2 inhibitors: mechanisms and future potential
Pantelis A. Sarafidis, Thessaloniki, Greece
- Iron supplementation in kidney and heart crosstalk: a hope for heart failure treatment
Mehmet Kanbay, Istanbul, Turkey

Part 2

Focus on prevention: health economy, blood pressure targets and choice of anticoagulation

- The health-economy of CKD: a plea for more prevention
Raymond Vanholder, Ghent, Belgium
- Hypertension metrics and treatment targets in renal transplantation: an update
Francesca Mallamaci, Reggio Calabria, Italy
- Anticoagulation in CKD patients with atrial fibrillation
Gunnar Heine, Homburg/Saar, Germany

**DESCARTES Working Group
(Developing Education Science and
Care for Renal Transplantation in
European States) in collaboration with
EKITA, the Organ Expert Section of ESOT
on kidney transplantation: what are the challenges
and opportunities ahead?**



- The European paired exchange program
Rainer Oberbauer, Vienna, Austria
- Machine perfusion: does it help to improve outcomes?
Gabriel C. Oniscu, Edinburgh, United Kingdom
- Minimisation strategies in kidney transplantation:
are we making progresses?
Ondrej Viklicky, Prague, Czech Republic
- FSGS in children
Licia Peruzzi, Turin, Italy
- The upcoming immunosuppressive drugs
Klemens Budde, Berlin, Germany
- Donor specific antibodies before and after
transplantation
Marta Crespo, Barcelona, Spain
- The future of kidney allocation within Eurotransplant
Uwe Heemann, Munich, Germany

**EUDIAL Working Group -
European Dialysis
Improving outcomes for the haemodialysis patient**



Part 1
Targets of treatment in dialysis patients

- Does achievement of solute clearance targets improve
patient outcomes
Andrew Davenport, London, United Kingdom
- Does achievement of blood pressure targets improve
patient outcomes
- Patient perspective of dialysis

Part 2

How to reduce cardiovascular risk?

- Detection, prevention and management of cardiac
arrhythmias during dialysis
- Atrial fibrillation: rate or rhythm control, anticoagulation:
yes or no
- Does bioimpedance and lung ultrasound guided
assessment of target weight improve outcomes
Carlo Basile, Acquaviva delle Fonti, Italy

ERA-EDTA Registry



- Modeling longitudinal data in survival analysis
- Interaction analyses
- How to validate the predictive value of a biomarker
- Grading evidence
- Impact of epidemiology on public health

European Renal Best Practice



**DIABESITY - Working Group
researching on the nephrological
impact in relation to diabetes and obesity
Insulin resistance and renal disease**



- Insulin resistance: pathogenesis and definitions
Drazenka Pongrac Barlovic, Ljubljana, Slovenia
- Muscle or liver?
Morten Buus Jørgensen, Copenhagen, Denmark
- Insulin resistance: cause or consequence of renal
disease?
Mads Hornum, Copenhagen, Denmark
- CKD, dialysis and insulin resistance
Danilo Fliser, Homburg/Saar, Germany
- Uremia, insulin resistance and beta-cell damage
Laetitia Koppe, Lyon, France
- Prediabetes and insulin resistance in the waiting list for
renal transplantation
Armando Torres, La Laguna (Tenerife), Spain

**Electrolytes and acid-base balance:
from physiology to clinic**

- Hypokalemia: a clinical perspective
- Hyponatremia and water balance disorders
Ewoot Hoorn, Rotterdam, The Netherlands
- Seeing the sodium in the patient
Christoph Kopp, Erlangen, Germany
- Mechanism and regulation of renal magnesium transport:
clinical implications
- New paradigms in renal phosphate handling
Carsten Wagner, Zurich, Switzerland
- Distal tubular acidosis: new findings
Francesco Trepiccione, Naples, Italy
- Key note talk: The effect of salt on the gut microbiome

**EUTox Working Group -
European Uremic Toxin**



**Uremic toxins: sources and alterations leading to
the uremic state**

- Systems medicine, molecular mechanisms and
pathways involved in CKD
Harald Mischak, Hannover, Germany
- Molecular modifications of proteins and peptides in CKD
Joachim Jankowski, Aachen, Germany
- MicroRNA and CKD
Laurent Metzinger, Amiens, France
- Sulfur amino acid metabolism derangement in uremia
Alessandra Perna, Naples, Italy
- Understanding the gut-kidney axis in chronic kidney
disease
Rosalinde Masereeuw, Utrecht, The Netherlands
- Uremic toxins and the gut microbiota
Griet Glorieux, Ghent, Belgium

EuroPD



**Integrating dialysis care: getting the best from
home therapies**

- How do we best help patients make an informed
modality choice?
Hillary Bekker, Leeds, United Kingdom
- What is the best way to deliver assisted peritoneal dialysis?
Thierry Lobbedez, Caen, France

- How can we best deliver an integrated home therapies dialysis programme?

James Heaf, Roskilde, Denmark

- Preventing technique failure in PD - what does it mean for the small dialysis programme?
Speaker to be confirmed

Vascular Access Society (VAS) in collaboration with the Young Nephrologists' Platform (YNP)



CKB-MBD Working Group Emerging insights in CKD-MBD



- Position of gastrointestinal sodium-phosphate transporter inhibition
Ziad Massy, Paris, France
- Novel approaches to treat renal osteodystrophy
João M. Frazão, Porto, Portugal
- CKD-MBD phenotypes and all-cause mortality
Marc Vervloet, Amsterdam, The Netherlands
- Novel compounds to regress ectopic calcification
Mario Cozzolino, Milan, Italy
- Ten years research on FGF23: will it ever enter clinical practice?
Sandro Mazzaferro, Rome, Italy
- Treatment of CKD-MBD after renal transplantation
Pieter Evenepoel, Leuven, Belgium

WGIKD - Working Group on Inherited Kidney Diseases What's new in rare kidney diseases?



- Ascertaining pathogenicity of genetic variants in congenital and inherited kidney disorders
Nine Knoers, Utrecht, The Netherlands
- Claudinopathies: a new class of tubulopathies
Dominik Müller, Berlin, Germany
- Diagnostic and therapeutic management of hypophosphatemic rickets from infancy to adulthood
Dominique Prié, Paris, France
- Novel therapeutic approaches in primary hyperoxaluria
Bernd Hoppe, Bonn, Germany
- What's new in Tuberous Sclerosis Complex?
Roser Torra, Barcelona, Spain
- Insights from urinary exosome analysis in inherited kidney diseases
Kirsten Y. Renkema, Utrecht, The Netherlands
- Transitioning rare kidney disease patients from paediatric to adult care
Speaker to be confirmed

Rheumatology for nephrologists

- Visual diagnosis quiz
Peter Herzer, Munich, Germany
- Back from the future - steroid free lupus therapy?
Speaker to be confirmed
- The conundrum of treating gout in patients with CKD
Jakub Závada, Prague, Czech Republic
- Forms of tubulointerstitial nephritis that need a rheumatology consult
Manuel Praga, Madrid, Spain

- Bortezomib and bone marrow transplantation - rescue options for severe SLE
Falk Hiepe, Berlin, Germany
- Can we ever stop immunosuppressive drugs in patients with systemic autoimmune diseases?
David Jayne, Cambridge, United Kingdom

Onconephrology

Part 1

- CKD in malignancy cause or consequence
Speaker to be confirmed
- Nephrologic management of renal and urothelial cancer
Speaker to be confirmed
- Kidney involvement in leukemia and lymphoma
Jan Kielstein, Braunschweig, Germany
- How to use wisely renal replacement therapy in oncology patients
Ben Sprangers, Leuven, Belgium

Part 2

- Hypertension in malignancy - comorbidity or complication of the therapy
Jolanta Malyszko, Bialystok, Poland
- Anemia in cancer patients to use or to avoid ESA and iron
Petra Tesarova, Prague, Czech Republic
- Acid base disturbances in cancer patients
Giovambattista Capasso, Naples, Italy
- Electrolytes disorders - common but underappreciated problem in malignancy and its treatment
Speaker to be confirmed

ERN Working Group - European Renal Nutrition Presentation of the 2018 KDOQI Clinical Practice Guideline for Nutrition in CKD



- Introduction, overview and rationale for the guidelines
T. Alp Ikizler, Nashville, U.S.A.
- Methodology and development of the clinical evidence library
Deepa Handu, Chicago, U.S.A.
- Guideline recommendations for macronutrients
Denis Fouque, Lyon, France
- Guideline recommendations for micronutrients
Daniel Teta, Sion, Switzerland
- Guideline recommendations for electrolytes and other nutrients
Juan Jesus Carrero, Stockholm, Sweden

EULIS, the Section of Urolithiasis of the European Association of Urology



Ethical aspects in dialysis and kidney transplantation in the elderly

- Dialysis - Pro
- Dialysis - Con
- Kidney transplantation - Pro
- Kidney transplantation - Con



Communications should concern all aspects of nephrology, the prevention and treatment of renal diseases and associated conditions or the scientific background to the study of the kidney.

GENERAL RULES

All abstracts must be submitted electronically through the congress website www.era-edta2018.org.

All abstracts must be received by January 12, 2018

Abstracts received after this date cannot be considered by the Paper Selection Committee.

CONFIRMATION

You will automatically receive an e-mail confirming our receipt of your abstract.

NOTIFICATION

The Presenting Author of each abstract accepted for publication will be notified by March 21, 2018. If the Presenting Author is unable to present the abstract, another co-author can take his/her place. A letter from the Presenting Author about the change is requested and must be received by the ERA-EDTA Operative Headquarters no later than April 10, 2018.

WITHDRAWAL / CHANGES

Submitted abstracts cannot be withdrawn or changed. No exceptions will be made.

CONTENT OF WORK AGREEMENT

The presenting author must confirm that all co-authors agree with the submission and content of the work for the 55th ERA-EDTA Congress. ERA-EDTA cannot be deemed responsible for any infringement of this rule.

COPYRIGHT

By submitting the abstract, the author assigns copyright to the ERA-EDTA.

ORIGINAL ABSTRACTS

Submitted abstracts must describe unpublished work which is not already in press and which is not awaiting possible acceptance by any other society that publishes its proceedings.

LANGUAGE

All abstracts must be written in English.

PROCESSING FEE

There is a nonrefundable processing fee of EUR 25.00 per submission. The processing fee must be paid at the time of submission by credit card (American Express, MasterCard, or Visa).

HOW TO SUBMIT ABSTRACTS

Only submission through the congress website is possible. Abstracts sent by post or email will not be accepted. You can send your abstracts from November 6, 2017. Please go to the congress website www.era-edta2018.org and follow the instructions for abstract submission.

All authors of correctly written and successfully submitted abstracts will receive confirmation by e-mail. Should you experience any unforeseen problems with the electronic submission, please contact the ERA-EDTA Operative Headquarters at abstracts@era-edta.org.

Do not mail or fax your abstract to the ERA-EDTA Operative Headquarters.

PUBLICATION

All abstracts accepted for presentation (either oral or poster) will appear in NDT. Abstracts will appear exactly as submitted. Any abstract considered unsuitable for reproduction will not be published.

LATE BREAKING CLINICAL TRIALS

The ERA-EDTA will consider abstracts related to unpublished clinical trials for a special "Late breaking clinical trials" session. The following trials will be considered for evaluation if they comply with the required characteristics:

- a prospective randomised intervention in renal patients (medications, education, dietetics, physiotherapy, etc...), including at least 100 patients;
- a prospective observational study, including at least 500 patients;
- approved by an institutional ethical committee;
- not previously reported or published.

Abstracts may be accepted as oral communications or posters, after regular evaluation by the review committee. The LBCT abstracts can be submitted through the congress website www.era-edta2018.org from **February 22 to March 16, 2018**.

Abstracts which do not meet the criteria above will not be considered for presentation.

FREE COMMUNICATIONS

The top scoring abstracts will be presented as free communications, combined with mini lectures from world-renowned scientists.

POSTERS

There will be two poster sessions (May 25 and 26, 2018). Posters will be sorted by topic and will remain on display from 7.30 to 17.00 hrs. Presenters will be by their poster during the dedicated session time (9.30-10.45 and 16.30-17.00) to discuss their research with the visiting audience. It will be possible to browse all posters online both onsite and after the congress. Also this year, the ERA-EDTA will be pleased to provide all poster presenters with the opportunity to have their posters printed and delivered free of charge at the congress venue.

Abstract Categories

55th ERA-EDTA
CONGRESS
Copenhagen
Denmark May 24th - 27th
2018

- A)** Acid-base and electrolytes
- B)** Cell signalling. Cell biology. Hormones
- C)** Renal development and cystic diseases
- D)** Genetic diseases and molecular genetics
- E)** Renal pathology. Experimental and clinical
- F1)** Hypertension. Experimental
- F2)** Hypertension. Clinical
- G)** Nephrolithiasis and uric acid
- H)** Clinical nephrology
- I)** Glomerulonephritis
- J1)** AKI. Experimental
- J2)** AKI. Epidemiology and outcome
- J3)** AKI. Prevention and treatment
- K1)** CKD. Lab methods, GFR measurement, urine proteomics
- K2)** CKD. Pathophysiology, progression and risk factors
- K3)** CKD. Clinical epidemiology
- K4)** CKD. Anaemia
- K5)** CKD. Bone disease
- K6)** CKD. Nutrition, inflammation and oxidative stress
- K7)** CKD. Rehabilitation
- L1)** Diabetes. Basic research
- L2)** Diabetes. Clinical studies
- M1)** Dialysis. Extracorporeal dialysis: techniques and adequacy
- M2)** Dialysis. Peritoneal dialysis
- M3)** Dialysis. Cardiovascular complications
- M4)** Dialysis. Vascular access
- M5)** Dialysis. Anaemia
- M6)** Dialysis. Bone disease
- M7)** Dialysis. Epidemiology and outcome
- M8)** Dialysis. Health services research
- M9)** Dialysis. Protein energy wasting, inflammation and oxidative stress
- N1)** Renal transplantation. Experimental, immunetolerance of allogenic and xenogenic transplants
- N2)** Renal transplantation. Epidemiology and outcome
- N3)** Renal transplantation. Treatment and immunosuppression
- O)** Paediatric nephrology
- P)** History of nephrology
- Q)** Patient education research and training in nephrology



Also this year the ERA-EDTA has decided to give up to 90 travel grants to attend the Copenhagen Congress to the best rated abstracts in the various categories. The Presenting Authors must be 40 years old, or younger, at December 31, 2018.

All awardees will receive:

- a) Free ERA-EDTA membership (category C);**
- b) A grant for EUR 500, except for the Presenting Authors of the best abstracts of each category whose grant will be of EUR 1,000.**

The Presenting Authors of the two best abstracts of each category, independently of age, will also receive a diploma.

To apply, please fill in the appropriate fields during the abstract submission at www.era-edta2018.org.

We “ASQ” for your help for young nephrologists in low income countries

ERA-EDTA has circulated an electronic feedback questionnaire aimed at collecting impressions, suggestions and remarks among the delegates of the last four Congresses, held in Amsterdam, London, Vienna and Madrid respectively.

Based on the final number of feedback questionnaires completed, ERA-EDTA will offer congress grants to young nephrologists living in low income countries (GPD < USD 10,000) to attend the ERA-EDTA Congress in Copenhagen. The winners will be chosen among those who have submitted an abstract which is then accepted for presentation at Congress.

This initiative, named Altruistic Support by Questionnaire (ASQ), has become part of the exclusive ERA-EDTA advantages for young nephrologists living in disadvantaged areas of the world where education and scientific updates are needed.

The Presenting Authors must be 45 years old, or younger, at December 31, 2018.

To apply, please fill in the appropriate fields during the abstract submission at www.era-edta2018.org.

IMPORTANT INFORMATION FOR YOUNG ABSTRACT AUTHORS

ERA-EDTA STANLEY SHALDON AWARD FOR YOUNG INVESTIGATORS

If you are 40 years old or younger, and your abstract is considered one of the best ones submitted to the last three ERA-EDTA Congresses, you can win the ERA-EDTA Stanley Shaldon Award for Young Investigators.

The winner will receive the award during the Welcome Ceremony of the annual ERA-EDTA Congress.

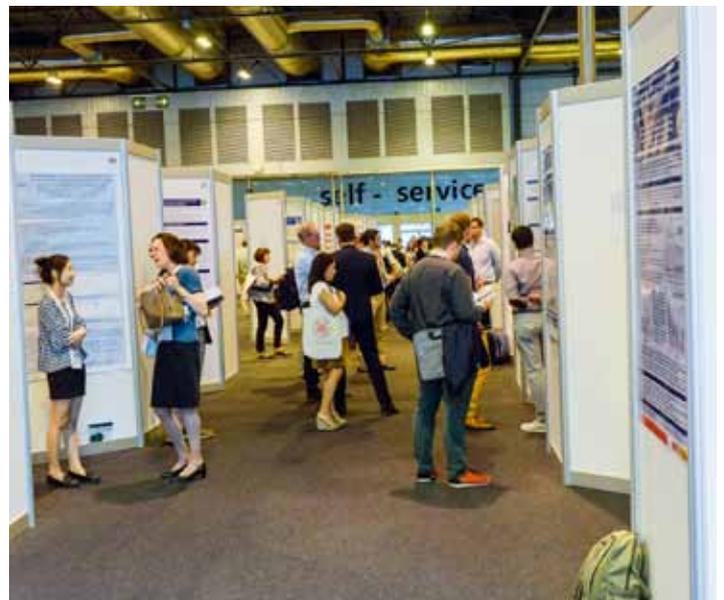
The award consists in a special invitation to participate in the ERA-EDTA Congress in which the award is given; three years of ERA-EDTA membership (category B); an ex-officio position in the Young Nephrologists’ Platform Board and a prize of EUR 10,000. Do not miss this unique opportunity to submit your abstract to the ERA-EDTA!

For more information you can go to our website www.eraedta.org (click on “About ERA-EDTA” and then on “ERA-EDTA Awards”).

YOUNG NEPHROLOGISTS’ PLATFORM “FREE MEMBERSHIP PROJECT”

A 1-year free ERA-EDTA membership will be given, automatically, to the 30 young people who have submitted an accepted abstract to an ERA-EDTA Congress. Only young people (< 40 years of age) who are already ERA-EDTA MEMBERS (category B) and YNP MEMBERS can receive this free ERA-EDTA membership. More information will be available during the abstract submission procedure.

Abstract submission deadline: JANUARY 12, 2018



ADMISSION

Admission to the scientific sessions is strictly reserved to registered congress members. Minors cannot access the session halls even if accompanied by a registered adult. The same applies also to the Exhibition.

ERA-EDTA in order to be fully compliant with both EFPIA and MedTech does not extend hospitality in any way to persons other than the registered congress persons, i.e. healthcare professionals.

CERTIFICATE OF ATTENDANCE

All regularly registered delegates will have the possibility to download the certificate of attendance from the delegates reserved area after the congress. If you need a hard copy, you can collect it at the dedicated desk located in the Registration Area of the **Bella Center Copenhagen**. Please notice that the certificate will specify the exact number of days that you will have attended the congress.

CME COURSES

Participation in the CME Courses on May 24, 2018 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 scan their badge 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 **Bella Center Copenhagen** during the Congress.

SOCIAL MEDIA

The official hashtag of the Congress is #ERAEDTA18. Social Media Guidelines will be available on the Congress website.

UEMS CME CREDITS

An application will be made to the European Accreditation Council for Continuing Medical Education (EACCME) for CME accreditation of the 55th ERA-EDTA Congress and pre-congress CMEs. The EACCME is an institution of the European Union of Medical Specialists (UEMS). Congress members 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 1 credit, you should contact the AMA directly. The total number of CME credits given to the ERA-EDTA Copenhagen Congress will be posted on the website (www.era-edta2018.org) as soon as they are available.

HOW TO RECEIVE UEMS CME CREDITS

ERA-EDTA will track attendance of congress members during the congress in the **Bella Center Copenhagen** each day. Regularly registered congress members must go to the session halls and scan their badge 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.

All regularly registered delegates will have the possibility to download the UEMS CME certificate from the delegates reserved area after the congress.

VENUE

Bella Center Copenhagen

Center Boulevard 5

DK - 2300 Copenhagen

www.bellacentercopenhagen.dk

Beware of Unofficial Websites!

Please be aware that there are unofficial websites that can turn up in search engine results that offer housing and registration for the 55th ERA-EDTA Congress but that are NOT linked in any way to ERA-EDTA. Please make sure to book your congress membership only through the official 55th ERA-EDTA Congress website at www.era-edta2018.org and your accommodation through Interplan AG, the officially appointed housing agent, <http://era-edta.interplan.de>.

Congress Membership Terms and Conditions

CONGRESS MEMBERSHIP FEES AND DEADLINES

	Within March 1, 2018	From March 2 to May 3, 2018	From May 4 to 27, 2018
Status	Early	Late	Onsite
ERA-EDTA Member¹ (categories A and B)	EUR 300.00	EUR 430.00	EUR 450.00
DNS Member² → (ERA-EDTA Member category C)	EUR 300.00	EUR 430.00	EUR 450.00
Non Member² → (ERA-EDTA Member category C)	EUR 500.00	EUR 600.00	EUR 700.00
Low Income Countries³ - ERA-EDTA Member¹ (categories A and B)	EUR 250.00		
Student/Trainee (29 years or older)⁴			EUR 300.00
Student (28 years old or younger)⁵			Available only starting May 23, 2018 at the congress venue FREE
1-2 Days⁶ ERA-EDTA Member¹ (categories A and B)			EUR 160.00 (1 day)
			EUR 290.00 (2 days)
1-2 Days⁶ DNS Member² → (ERA-EDTA Member category C)			EUR 160.00 (1 day)
			EUR 290.00 (2 days)
1-2 Days⁶ Non Member² → (ERA-EDTA Member category C)			EUR 200.00 (1 day)
			EUR 370.00 (2 days)
Blank Group⁷	EUR 460.00		
General Practitioner, Dietitian, Nurse, Dialysis Technician (working and living in Denmark) ⁸			Available only starting May 23, 2018 at the congress venue EUR 100.00

IMPORTANT: Please note that congress members category C will not be entitled to reimbursement if, at a later stage, they become members category A-B or if, despite being active members category A-B, they incorrectly register as category C. Once the registration has been processed it cannot be changed or reimbursed. New applicants and members (categories A and B) with outstanding membership fees, wishing to sign up/pay for ERA-EDTA membership (categories A and B) in order to benefit from the reduced congress membership fee, must apply for categories A or B membership, or pay the outstanding fees, no later than 10 working days prior to the respective registration deadlines.

¹ERA-EDTA Member Category A-B

Please check full information at
<http://web.era-edta.org/membership-categories>

²DNS Member/Non Member automatically becomes an **ERA-EDTA Member, category C.**

Please check full information at
<http://web.era-edta.org/membership-categories>

³Low Income Countries - ERA-EDTA Member Category A-B

Reserved for ERA-EDTA members A-B living in all Countries

in the world whose Gross Domestic Product per capita income is less than USD 10,000 a year. If you live and work in one of the Countries listed below you are entitled to pay these special discounted fees (for category A and B membership only).

Afghanistan, Albania, Algeria, Angola, Armenia, Azerbaijan, Bangladesh, Belarus, Belize, Benin, Bhutan, Bolivia, Bosnia and Herzegovina, Botswana, Bulgaria, Burkina-Faso, Burundi, Cambodia, Cameroon, Cape Verde, Central African Republic, Chad, Colombia, Comoros, Cote d'Ivoire, Democratic Republic of Congo, Democratic Republic of Timor-Leste, Djibouti, Dominica, Dominican Republic, Ecuador, Egypt, El Salvador, Eritrea, Ethiopia, Fiji, F.Y.R. of Macedonia, Gambia, Georgia, Ghana, Grenada, Guatemala, Guinea, Guinea-Bissau, Guyana, Haiti, Honduras, India, Indonesia, Iran, Iraq, Jamaica, Jordan, Kenya, Kiribati, Kosovo#, Kyrgyz Republic, Lao People's Democratic Republic, Lesotho, Liberia, Libya, Madagascar, Malawi, Maldives, Mali, Marshall Islands, Mauritania, Mauritius, Micronesia, Moldova, Mongolia, Montenegro, Morocco, Mozambique, Myanmar, Namibia, Nepal, Nicaragua, Niger, Nigeria, P.R. of China, Pakistan, Palestine, Papua New Guinea, Paraguay, Peru, Philippines, Republic of Congo, Rwanda, Samoa, Sao Tome and Principe, Senegal, Serbia, Sierra Leone, Solomon Islands, South Africa, South Sudan, Sri Lanka, St. Lucia, St. Vincent and the Grenadines, Sudan, Suriname, Swaziland, Syria, Tajikistan, Tanzania, Thailand, Togo, Tonga, Tunisia, Turkmenistan, Tuvalu, Uganda, Ukraine, Uzbekistan, Vanuatu, 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.

4Student/trainee congress membership

The birth year must not be earlier than 1989 and no later than 1983.

Online registrations available from May 4 to May 27, 2018. From May 23, 2018 you can register only on site directly at the Bella Center Copenhagen. During the online procedure you must upload a photocopy of your picture ID (passport, identity card, driving license with birth date), a photocopy of your original student's card (for students) and a signed letter from your mentor/university to prove your status. ERA-EDTA reserves the right to verify all declarations. If you register onsite in Copenhagen you must hand over the documents mentioned above to the hostess.

5Student congress membership

28 years old or younger, the birth year must not be earlier than 1990).

You can register only on site directly at the Bella Center in Copenhagen starting from May 23, 2018. You must show at the New Registration desk a copy of your picture ID (passport, identity card, driving license with birth date) and your original student's card. ERA-EDTA reserves the right to verify all declarations.

REGISTRATION IS FREE!

61-2 Days congress membership is available online from May 4 till May 27, 2018. You can register online also during the congress or at the Bella Center Copenhagen, from May 23, 2018. This type of registration entitles admission to the session and poster and exhibition halls only on the date mentioned on the congress badge. It is also possible to make two one-day registrations if you are able to attend the congress for two days (consecutive or not).

7Blank group congress membership (*minimum of 10 and more delegates*): booking and payment must be received by the early deadline of March 1, 2018. The final list of names must be submitted by May 9, 2018.

8General Practitioner, Dietitian, Nurse, Dialysis Technician (*working and living in Denmark*). You can register only onsite directly at the Bella Center in Copenhagen starting from May 23, 2018. You must show at the New Registration desk a document that proves your status. ERA-EDTA reserves the right to verify all declarations.

PRESCRIBING PROFESSIONALS

Prescribing professionals will have a different type of badge, thus it is possible to distinguish them from the other healthcare professionals.

HOW TO REGISTER

All registrations must be submitted through www.era-edta2018.org

METHODS OF PAYMENT

Until May 11, 2018: credit cards (Visa, MasterCard and American Express) and bank transfer. Payments by cheque will NOT be accepted.

From May 12 to May 27, 2018: credit cards (Visa, MasterCard and American Express). Payments made by bank transfer or cheque will NOT be accepted.

Cash (EUR and DKK only) will be accepted onsite, thus **only from May 23 to 27, 2018.**

CANCELLATION POLICY

Before April 27, 2018	After April 27, 2018
75% of the amount paid, net of bank charges.	No refund of the amount paid.

All reimbursements will be done after the congress.

**Please check the website
www.era-edta2018.org
for full information
on the congress membership terms
and conditions**

Beware of Unofficial Websites!

Please be aware that there are unofficial websites that can turn up in search engine results that offer housing and registration for the 55th ERA-EDTA Congress but that are NOT linked in any way to ERA-EDTA. Please make sure to book your congress membership only through the official 55th ERA-EDTA Congress website at www.era-edta2018.org and your accommodation through Interplan AG, the officially appointed housing agent, <http://era-edta.interplan.de>



COPENHAGEN

Copenhagen, the Danish maritime capital, has been named the “World’s most livable city” repeatedly, and Danes have been ranked the “World’s Happiest People” over and over again. This is partly due to a favorable work-life-balance, high levels of tolerance and a peaceful democracy.

Copenhagen is easily accessible, with Copenhagen airport being Scandinavia’s main traffic hub offering non-stop flights from around 165 international destinations. The 10-15 minute Metro journey connection between the international airport, the congress venue “Bella

Center” and the city center makes Copenhagen a great congress destination due to the very close connections: this allows participants to enjoy both the city and the congress. The city is designed for pedestrians and cyclists, and you will find that it is easy to navigate the streets of Copenhagen.

Copenhagen has been in the Top 20 on both ICCA’s and UIA’s list of the world’s most popular convention cities for decades and also in recent years.

Capital of Sustainable Meetings

Copenhagen has been appointed European Green Capital for 2014 and has one of the world’s most ambitious climate policies - with a goal of being the first carbon neutral capital by 2025. It is therefore almost impossible not to have green and responsible meetings in Copenhagen.

Copenhagen was ranked “World’s Most Walkable City” by Walk 21 in 2013. Its compact city centre makes walking between meeting venues, hotels, sights, restaurants and shopping areas a matter of minutes. Or you can join the locals and go by bike. Copenhagen is home to the world’s busiest bicycle lane, used by 36,000 cyclists per day and the city’s rush hour is therefore quite different from most others. Here it is not the roads but the bicycle lanes which are crowded, mainly because 56% of all Copenhagengers commute by bike. In 2016, bicycles even outnumbered cars in Copenhagen.

Sustainable accommodation and venues in Copenhagen

Nearly 70% of the hotel rooms in Copenhagen are eco-certified, so sleeping with a green conscience is not a challenge. Many of the city’s convention venues are Green Key certified, including the two

largest venues Bella Center and Tivoli Congress Center. International hotel chains such as the Hilton and the Radisson have their own environmental programs. For instance, starting in 2012, the Radisson Blu Hotels & Resorts took an ambitious engagement with the Think Planet strategy to reduce energy consumption by 25% in five years.

The city of Copenhagen and the Copenhagen CVB was ranked second in the first-ever sustainability ranking for event destinations worldwide, the Global Destination Sustainability Index, in 2016.

TRANSPORTATION FROM/TO AIRPORT

Metro transportation from Copenhagen airport

The metro runs every 5 minutes during the day and every 20 minutes at night. The journey from the airport into central Copenhagen takes 15 minutes. The station and ticket desks are located in Terminal 3. A single ticket costs 36 DKK, but you can also buy travel cards (Klippekort). For information please check the Copenhagen Metro website <http://intl.m.dk>.

Taxi transportation from Copenhagen airport

Taxis pick up passengers at terminal 1 and 3 and will get you to downtown Copenhagen in about 20 minutes depending on traffic. Taxis are usually waiting outside each terminal. It will cost approximately DKK 250-300.

Mobile phone coverage

Denmark uses the GSM international coverage standard. American frequency ranges (850 and 1900 MHz) are different from those in Europe (900 and 1800 MHz), but the widespread use of 3G and 4G devices provides support for the entire range of bands in both continents.

Time Zone

Copenhagen is located in the Central European time zone (CET = GMT / UCT + 1).

Tourist Information

For information on sightseeing, dining tips, shopping, cultural events, etc. please visit the official Copenhagen tourist guide website

www.visitcopenhagen.com/copenhagen-tourist

ESSENTIAL INFORMATION

Currency

Danish Krona is the official currency of Denmark (DKK).

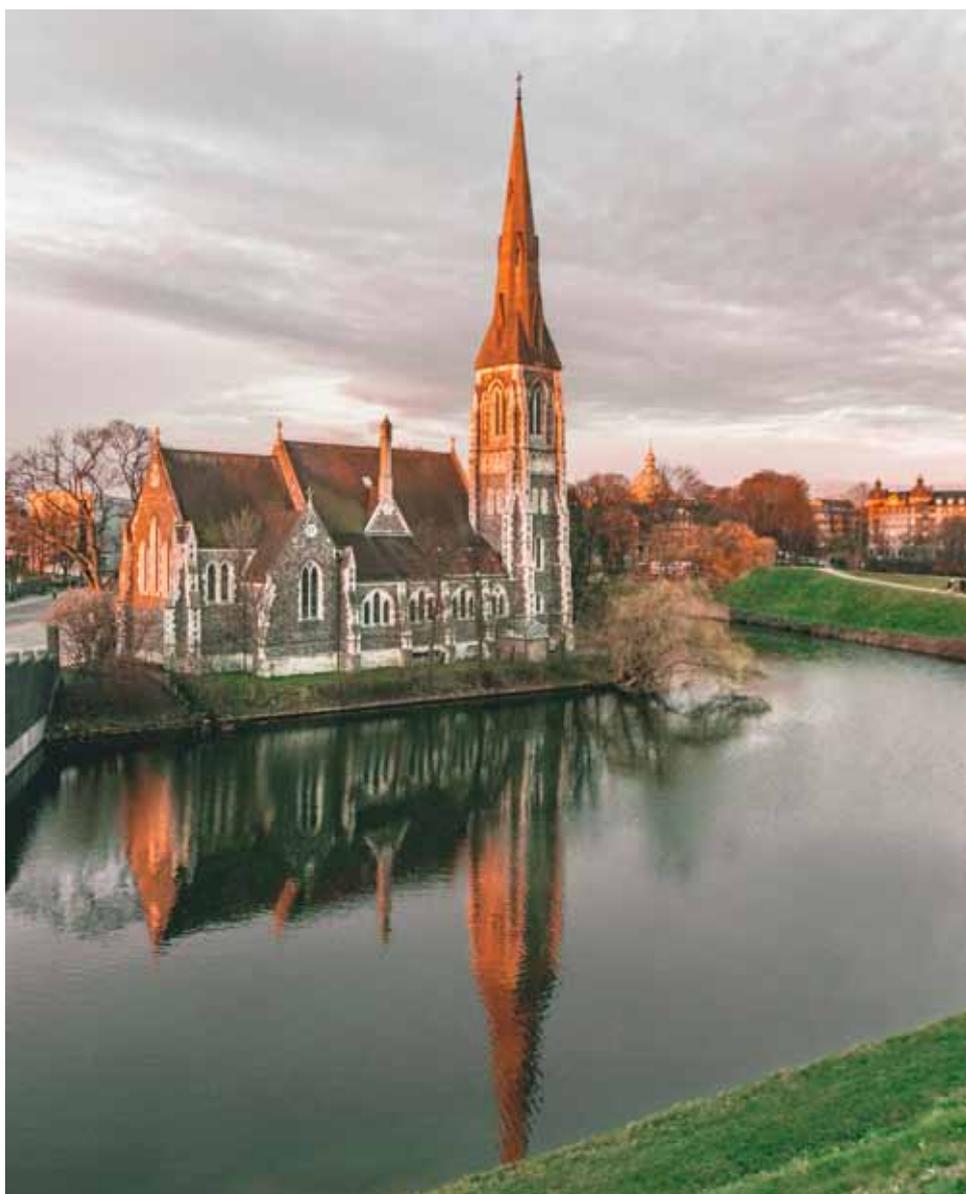
Visa and MasterCard are widely accepted. Prices are quoted including the official VAT amount, currently 25% Danish VAT. Exceptions of a reduced VAT amount apply only for limited number of services, such as public transportation, newspapers etc.

Language

The mother tongue of Denmark is Danish. However, since movies are shown only in their original language all Danes learn the English language from an early age, therefore they are fluent English speakers.

Electricity

Denmark's standard electricity supply is 220 Volts (V), 50 Hertz (Hz) AC. Plugs and sockets are European standard with 2 round pins.



VISA/INVITATION LETTER

An invitation letter for visa purposes can be obtained through the ERA-EDTA 55th Congress website www.eraedta2018.org (first option). Should this not be sufficient, the Visa secretariat will be pleased to send, upon request, a personal invitation to all participants (second option). 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 email to the President of the Congress Prof. Bo Feldt-Rasmussen (visa@era-edta.org) at least three months in advance (third option). 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 visas that are not granted.

International registrants, who require a letter of invitation, will first need to complete the online registration for the 55th ERA-EDTA Congress (check www.era-edta2018.org, section "Registrations"). Letters of invitation for spouse/guest registrants will only be provided if the accompanying individual has completed his or her congress registration.

THOSE WHO DO NOT REQUIRE A VISA

If you are a citizen of one of the following countries, you **do not need a visa** in order to enter Denmark: Andorra, Antigua and Barbuda, Albania*, Argentina, Australia, Austria, Bahamas, Barbados, Belgium, Bosnia-Herzegovina*, Brazil, Brunei Darussalam, Bulgaria, Canada, Chile, Colombia, Costa Rica, Croatia, Cyprus, Czech Republic, Dominica, El Salvador, Estonia, F.Y.R. of Macedonia*, Finland, France, Georgia*, Germany, Greece, Grenada, Guatemala, Honduras, Hungary, Iceland, Ireland, Israel, Italy, Japan, Kiribati, Latvia, Liechtenstein, Lithuania, Luxembourg, Malaysia, Malta, Marshall Islands, Mauritius, Mexico, Micronesia, Moldova*, Monaco, Montenegro*, Netherlands, New Zealand, Nicaragua, Northern Marianas, Norway, Palau, Panama, Paraguay, Peru, Poland, Portugal, Romania, Samoa, San Marino, Saint Kitts and Nevis, Serbia**, Seychelles, Singapore, Slovakia, Slovenia, Solomon Islands, South Korea, Spain, St. Lucia, St. Vincent and the Grenadines, Sweden, Switzerland, Taiwan***, Timor-Leste, Tonga, Trinidad and Tobago, Tuvalu, Ukraine*, United Arab Emirates, United Kingdom, United States, Uruguay, Vanuatu, Vatican City State, Venezuela.

THOSE WHO NEED A VISA

If you are a citizen of one of the following countries, you **must have a visa** in order to enter Denmark: Afghanistan, Albania*, Algeria, Angola, Armenia, Azerbaijan, Bahrain, Bangladesh, Belarus, Belize, Benin, Bhutan, Bolivia, Bosnia-Herzegovina*, Botswana, Burkina Faso, Burma (Myanmar), Burundi, Cambodia, Cameroon, Cape Verde, Central African Republic, Chad, China****, Comoros, Congo, Cuba, Democratic Republic of Congo, Djibouti, Dominican Republic, Ecuador, Egypt, Equatorial Guinea, Eritrea, Ethiopia, F.Y.R. of Macedonia*, Fiji, Gabon, Gambia, Georgia*, Ghana, Guinea, Guinea-Bissau, Guyana, Haiti, India, Indonesia, Iran, Iraq, Ivory Coast, Jamaica, Jordan, Kazakhstan, Kenya, Kosovo, Kuwait, Kyrgyzstan, Laos, Lebanon, Lesotho, Liberia, Libya, Madagascar, Malawi, Maldives, Mali, Mauritania, Moldova*, Mongolia, Montenegro*, Morocco, Mozambique, Namibia, Nauru, Nepal, Niger, Nigeria, North Korea, Oman, Pakistan, Papua New Guinea, Philippines, Qatar, Russia, Rwanda, Sao Tomé and Príncipe, Saudi Arabia, Senegal, Serbia**, Sierra Leone, Somalia, South Africa, South Sudan, Sri Lanka, Sudan, Suriname, Swaziland, Syria, Taiwan***, Tadjikistan, Tanzania, Thailand, Togo, Tunisia, Turkey, Turkmenistan, Uganda, Ukraine*, Uzbekistan, Vietnam, Yemen, Zambia, Zimbabwe as well as if you have a passport issued by the Palestinian Authority.

Only citizens with biometric passports are **exempt from the visa requirement.*

***Only citizens with biometric passports are **exempt** from the visa requirement. This does not apply to persons with passports issued by the Serbian Coordination directorate Koordinaciona uprava.*

****Only citizens with a passport issued by Taiwan which contains an identity card number are **exempt** from the visa requirement. The same applies to citizens with old Taiwanese passports with "Republic of China" on the front page, if the stated place of birth is Taiwan and the passport contains an identity card number.*

*****Citizens with a "Hong Kong Special Administrative Region" passport, a "Região Administrativa Especial de Macau" passport or a "British National Overseas" passport are **exempt** from the visa requirement.*

Citizens of these countries can also travel to Denmark if they have a residence permit or a long-term visa issued by another country in the European Union (with the exception of Bulgaria, Croatia, Cyprus and Romania),

Switzerland, Norway, Iceland and Lichtenstein.
Citizens of all other countries must be in possession of documents which justify the object and the conditions of their stay, and be in possession of sufficient economic resources for their maintenance throughout the period they are intending to remain in Denmark. The documents they are required to present will vary according to the reason of the trip.

The maximum stay in Denmark is 90 days.

It is advisable to purchase travel insurance for your trip.

Given that conditions may vary, we suggest that you contact the Danish Embassy or Consulate in your country to verify these requirements before you plan your trip.

For all information please check the Official Portal for Foreigners (www.nyidanmark.dk/en-US).

APPLICATIONS FOR SHORT TERM VISAS

(Tourism, private, business, conference)

All visa applicants must apply at the Danish Embassy or Consulate in person.

IMPORTANT NOTES

Applications cannot be submitted more than three months prior to departure. However please present your application at least two months before the intended travel.

The consular fees have to be paid when submitting the application; these fees are not reimbursed in case of visa refusal. All points of the visa application form have to be filled in completely and must be correct. If documents are missing, this may cause inadmissibility of the application or delay with the application.



Interplan Congress, Meeting & Event Management AG from Munich, Germany has been appointed as the Official Housing Bureau for the 55th ERA-EDTA Congress.

Room blocks at special rates are being held in a variety of hotels, all located within a 10 km radius from the congress venue. Please find the hotel details and make your booking online through the official Housing website <http://era-edta.interplan.de/>

The hotel prices quoted in the website are per room and per night and they are quoted in Danish Krona (DKK); they already include breakfast as well as 25% Danish VAT.



**Interplan Congress,
Meeting & Event Management AG**

Phone: +49-89-54 82 34 9055

Email: hotels.eraedta@interplan.de



Beware of Unofficial Websites!

Please be aware that there are unofficial websites that can turn up in search engine results that offer housing and registration for the 55th ERA-EDTA Congress but that are NOT linked in any way to ERA-EDTA. Please make sure to book your congress membership only through the official 55th ERA-EDTA Congress website at www.era-edta2018.org and your accommodation through Interplan AG, the officially appointed housing agent, <http://era-edta.interplan.de>.

Individual Reservations

Book your hotel room through this website <http://era-edta.interplan.de/booking.html>.

Your Visa or Mastercard is required to guarantee the booking. Usually, the payment will be then charged directly by the hotel upon your arrival. However, a few hotels reserve the right to pre-charge your credit card with the amount due. However, these charges will only be made after the published deadline regarding the free cancellation policy. The invoice will be sent to you directly from the hotel.

This same website (<http://era-edta.interplan.de/booking.html>) should also be used if you wish to book on behalf of another person or make a booking of up to 5 rooms for your traveling.

The payment can be made either during the online booking process with your credit card through secured online credit card payment or by bank transfer.

Group Reservations

The given room availability will give you an idea of which hotel offers the requested capacity to host your group. To make a booking, please forward the detailed request via the online form at <http://era-edta.interplan.de/booking.html> or by email to hotels.eraedta@interplan.de.

When does the hotel receive my booking?

Your booking is secured only after you successfully finalize the online booking process. An official email confirmation letter will be sent to you within three working days.

Interplan will give the hotel a complete rooming list that will include all the names of the guests approximately two weeks prior to the event: it is for this reason that if you contact the hotel directly they will not be able to find your name/your booking right away. All enquiries made at this time must be directed to Interplan and not to the hotel. However, after the list is in the hands of the hotel, and therefore two weeks before the event, all booking enquiries must be directed directly to the hotel.

YOU WILL FIND THE COMPLETE AND UPDATED LIST OF AVAILABLE HOTELS, AS WELL AS A HOTEL MAP, ON THE CONGRESS WEBSITE

www.era-edta2018.org



(UNDER THE SECTION "HOTEL ACCOMMODATION").

Next ERA-EDTA Congresses

55th ERA-EDTA CONGRESS
Copenhagen
Denmark May 24th - 27th
2018

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LEADING EUROPEAN NEPHROLOGY

56th
ERA-EDTA
Congress

Budapest, Hungary **2019** June 13th - 16th

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LEADING EUROPEAN NEPHROLOGY

57th
ERA-EDTA
CONGRESS
MILAN, ITALY
JUNE 6-9, 2020

MiCo

1

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

2

Receive its journals **ndt** (Nephrology Dialysis Transplantation – impact factor 4.470) and **ckj** (Clinical Kidney Journal - open access), the most important nephrological journals in Europe.




ERA-EDTA
LEADING EUROPEAN NEPHROLOGY

What do for

ERA-EDTA membership benefits:

- NDT subscription
- Exclusive access to
- Very special low
- Special access to
- Special Discounts



www.era-edta.org



14

ERA-EDTA gives more than 1,200 free online subscriptions to **ndt** and **ckj** to low income 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.

13

ERA-EDTA has created specific Working Groups to encourage research, communication of knowledge, teaching and to participate in education programmes. All Working Groups organise cutting-edge CME courses related to their research field(s).

ERA-EDTA cooperates with other major Societies of Nephrology and other medical specialties: special ERA-EDTA sessions are organized at the ASN, ESPN, JSN, ESOT, EuroPD, ISPD, etc.

12



ERA-EDTA Flash - No 122, February 2018

European Nephrology Portal (ENP)
Member Registration: All in one place!

ERA-EDTA Flash logo and **ENP** logo are visible.

11

The European Nephrology Portal (ENP), launched in 2016, is a fundamental educational tool for all Nephrologists all over the World. A meta-search function allows to easily find content and to access the relevant files from different ERA-EDTA content sources. At the moment, ENP content will feature speaker materials from ERA-EDTA Congresses, E-Posters and NDT-Educational Summary Reports of selected Congress presentations, ERA-EDTA working groups, CME courses slides, the ERA-EDTA Dialogues and ERA-EDTA's Young Nephrologists' Platform program. New content is continuously being added. Visit www.enp-era-edta.org.



YNP

The Young Nephrologists' Platform (YNP) aims to involve young nephrologists in all ERA-EDTA activities and to help YNP members in their career. One of YNP's many successful activities is the YNP Advisory Program.

10



3

Participate in its annual congresses, major events attended by nephrologists from all over the world. More than 10,000 participants attended the last ERA-EDTA Congress (Madrid, Spain - June 3-6, 2017). ERA-EDTA members can take advantage of extremely low early preregistration fees.



4

ERA-EDTA has a diverse programme of CME Courses throughout Europe. In 2017, 19 events have been organised in many different countries. ERA-EDTA members receive free access to a selection of these presentations directly online.

5

ERA-EDTA started its Fellowship Programme in 2006. Up to now, more than 180 fellowships have been granted.

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 by improving the outcome of patients with kidney disease in a sustainable way through enhancing the availability of knowledge.



9

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 based in European countries, as well as long or short term fellowships (see point 5).



ERA-EDTA is a medical association active in encouraging cultural communication and knowledge

What can ERA-EDTA do for you?

Members are entitled to **EXCLUSIVE** benefits: including exclusive access to the archives of scientific and educational contents; free registration fee at the ERA-EDTA Congress; free access to the ERA-EDTA restricted libraries on the web-site; free access to Oxford University Press Medical publications



What can you do for ERA-EDTA?
Become a member and start to network now!

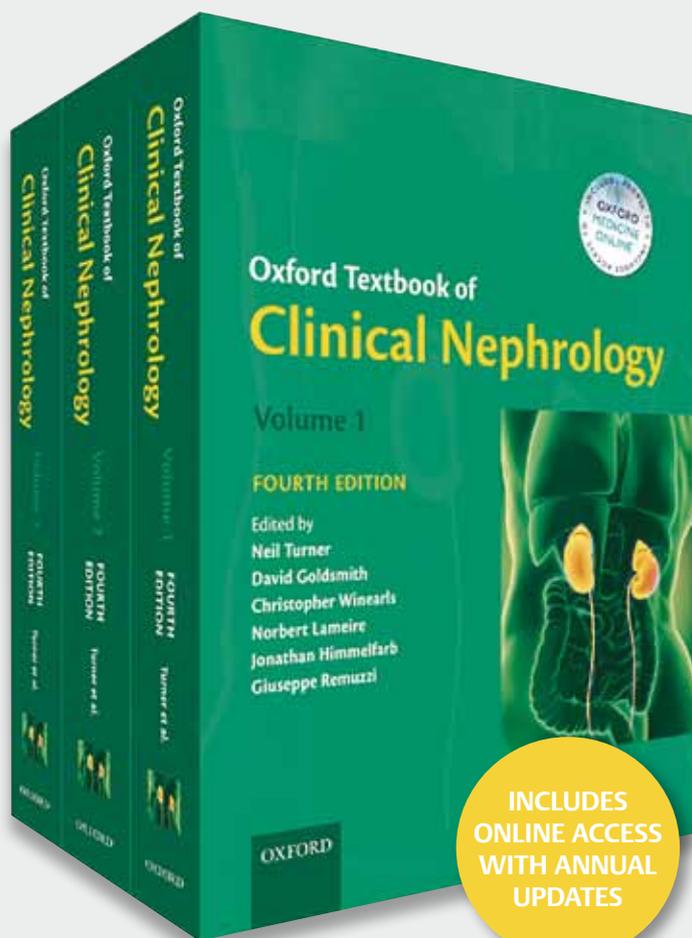
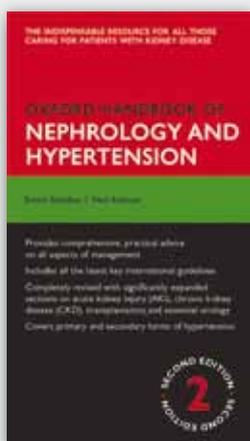
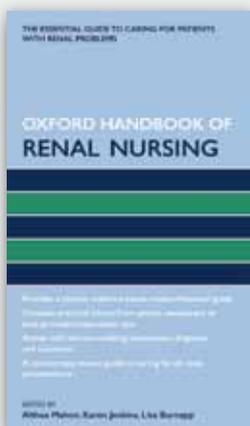
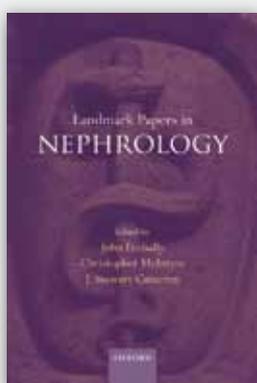
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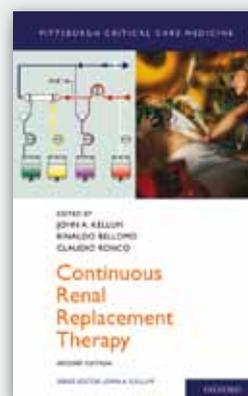
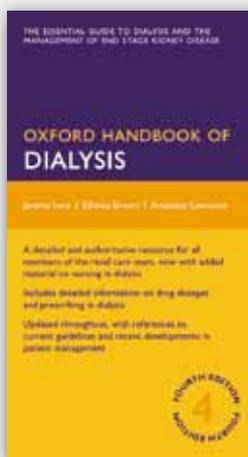
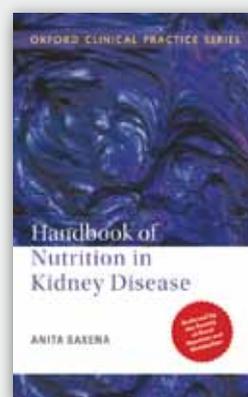
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WHY SHOULD YOU BECOME AN ERA-EDTA MEMBER?



As a member you will become part of one of the most influential European Medical Associations!

Check out all benefits:

- NDT (Nephrology Dialysis Transplantation) subscription, including exclusive access to the archives.
- Exclusive live streaming sessions during ERA-EDTA Annual Congress.
- **New!** Free online access to SDI (Seminars in Dialysis) to all ERA-EDTA members!
- Unlimited access to ERA-EDTA Congress E-materials, to all ERA-EDTA members who participate at the Congress.
- Exclusive access to special content on ENP (i.e. CME courses slides, ERA-EDTA Dialogue).
- Possibility to organize ERA-EDTA sponsored CME courses.
- Active participation in the decision making policies of the Association.
- Special discounted congress membership fees at the annual congress.
- Special discounts (35%!) on the purchase fees of Oxford University Press (OUP) books.
- Participation in the Young Nephrologists' Platform (YNP), if you are less than 40 years old.
- Take advantage of special membership fees for low income countries.
- Exclusive free access to EuroPD videos. **EUROPD**





55th ERA-EDTA CONGRESS

Copenhagen

Denmark May 24th - 27th

2018

Held jointly with the
Danish Society
of Nephrology



www.era-edta2018.org

