

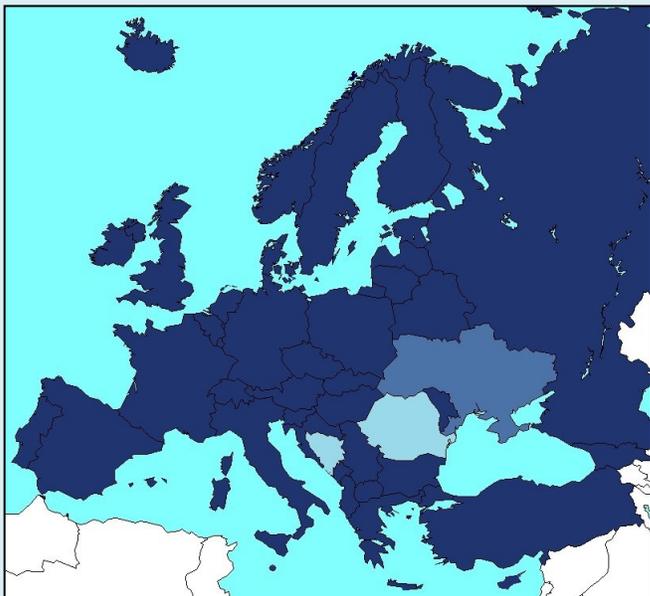
ESPN <https://espn-online.org>

ESPN/ERA-EDTA Registry <https://www.espn-reg.org>

ESPN/ERA-EDTA Registry Scientific Committee

Jérôme Harambat, France, chairman*
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*ESPN representatives on the ERA-EDTA Registry Committee



-  Provided extended data to the ESPN/ERA- EDTA Registry
-  Provided limited data to the ESPN/ERA-EDTA Registry
-  Provided data via the ERA-EDTA Registry

ESPN/ERA-EDTA Registry

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Highlights of 2020

We are happy to update you on the latest news and activities of the ESPN/ERA-EDTA Registry.

Although we all have faced difficult times due to the COVID-19 pandemic, we still have been able to perform research, which would not have been possible without your commitment and enthusiasm.

With the help of all data contributors we were able to publish 2 papers in 2020 (see list of publications for further details), one paper is in press and several other papers have been submitted or are in preparation.

In 2020, Simeon Dupont, a trainee in paediatrics from Germany, started his fellowship at the ESPN/ERA-EDTA Registry. Together with Raphael Schild, paediatric nephrologist from Germany, he worked on a project on comorbidities. Below you will find his experiences.

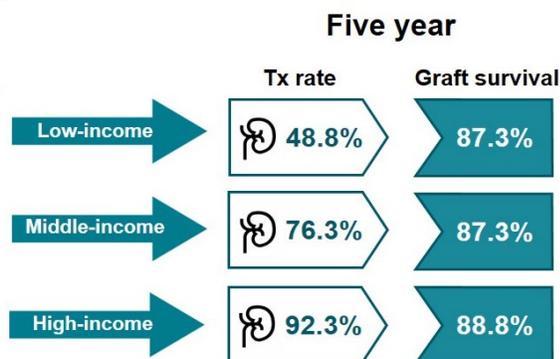
If you are also interested in performing a research project on the Registry, or when you would like to know more about participating in the ESPN/ERA-EDTA Registry, please let us know.

Disparities in kidney transplantation, but little variation in graft survival of children across Europe

By Marjolein Bonthuis

Although kidney transplantation is qualitatively the best and most cost-effective treatment for paediatric ESKD, substantial variation in practices and transplant rates exists between European countries. In this study, we aimed to identify differences in access to and outcomes after paediatric kidney transplantation.

We found large disparities in access to paediatric kidney transplantation, whereas graft survival rates were relatively similar. Improving the access to kidney transplantation, particularly in low- and middle-income countries could result in substantial health gains.



Bonthuis et al.
 Kidney Int. 2020 Aug;
 98(2):464-475

Publications 2020

Bonthuis M, Groothoff JW, Ariceta G, Baiko S, Battelino N, Bjerre A, Cransberg K, Kolvek G, Maxwell H, Miteva P, Molchanova MS, Neuhaus TJ, Pape L, Reusz R, Rousset-Rouviere C, Sandes AR, Topaloglu R, van Dyck M, Ylinen E, Zagozdzon I, Jager KJ, Harambat J.

Growth patterns after kidney transplantation in European children over the past 25 years: an ESPN/ERA-EDTA Registry Study.

Transplantation. 2020; 104(1):137-144.

Bonthuis M, Cuperus L, Chesnaye NC, Akman S, Melgar AA, Baiko S, Bouts AH, Boyer O, Dimitrova K, Carmo CD, Grenda R, Heaf J, Jahnukainen T, Jankauskiene A, Kaltenecker L, Kostic M, Marks SD, Mitsioni A, Novljan G, Palsson R, Parvex P, Podracka L, Bjerre A, Seeman T, Slavicek J, Szabo T, Tönshoff B, Torres DD, van Hoeck KJ, Ladfors SW, Harambat J, Groothoff JW, Jager KJ.

Results in the ESPN/ERA-EDTA Registry suggest disparities in access to kidney transplantation but little variation in graft survival of children across Europe.

Kidney Int. 2020; 98(2):464-475.

We would also like to thank all the contributors of the Registry and look forward to collaborating with you in 2021!

A fellowship in 2020, different from expectations

By Simeon Dupont

Trainee Paediatrics, Hamburg (Germany)



How to describe the experience of a research fellowship at the ESPN/ERA-EDTA Registry in the year 2020?

Yes, it is known that epidemiology, by looking into the past, helps us to look into the future; but who would have predicted this current global situation?

In my time working on the ESPN/ERA-EDTA Registry project I was able to see, that distance is relative (and I'm not talking about Einstein's general relativity). Knocking on a door for exchange of ideas turned into phone calls, seminars into online conferences, and the meeting place called 'coffee machine' turned into 'Zoom'. The after-work social activities became online-quiz-nights, and seeing everyone on a screen in their own homes was on a different level closer than expected. While it seemed that 'physical distance' was increasing, it was especially the feeling of still being connected and 'going through this together', that created a bond and maybe even created a decrease in 'social distance' in fact.

But even without SARS-CoV2, clinicians nowadays are exposed to more, and more complex clinical situations. In times of fast medical progress, this even leads to constant changes in patient demographics.

Comorbidities in children on kidney replacement therapy (KRT) occur frequently and form such a complex situation for clinical decision making. They often complicate individual choices for treatment as well as prognostics, posing further challenges for the clinician.

In our study, besides being able to show the increasing prevalence of comorbidities in children commencing KRT, we also found a lower access to transplantation for comorbid patients. Even though they had a higher mortality risk, particularly when on dialysis, once transplanted, outcomes did not reveal to be different than those for children without any comorbidity.

Therefore, we hope our results will encourage clinicians to consider kidney transplantation as treatment of choice for all paediatric KRT patients, also in children with comorbidities.

Looking back at my fellowship, I'm happy and grateful for this experience and I'm really looking forward to the next one. Maybe this time back in 3D, though!