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## **Kidney Research UK Fellows Day 2015**

Prepared by Hayward Medical Communications on behalf of Kidney Research UK





**Our 15th annual Kidney Research UK Fellows Day took place in York on 14 and 15 September 2015. I would like to express our gratitude to our industry partners, listed in the report, whose support made this meeting possible.**

2014–15 was another exciting and successful year for Kidney Research UK. We

were delighted to be able to increase our investment into research and innovation grants again this year, to more than £5 million. We plan further growth over the next year and beyond, in line with our strategic intent of growing renal research capacity in the UK. Intercalated degrees form an important part of this and Kidney Research UK was able to award an impressive 14 intercalated student grants last year.

We have recently implemented a new research grant management system, which includes an online grant application portal, to make the submission process more effective for both applicants and the charity. We have also been able to add new awards to our portfolio, including the jointly funded Professor David Kerr Clinician Scientist Award, in partnership with the Medical Research Council, and the John Feehally–Stoneygate Research Awards.

We look forward to the first ever UK renal research strategy, due to be published early in 2016. This will provide an important touchstone for Kidney Research UK's own research strategy, helping us to play our part in identifying and researching the priority evidence gaps and, ultimately, provide a better future for kidney patients. As part of this, we will enhance our commitment to patient involvement, engaging them in our work and securing their views on research priorities.

On a personal note, this was my last full meeting as Chair, before stepping down after three years. I would like to thank everyone who attended and helped make the event so enjoyable. The meeting was a huge success – the science was of a very high standard, the participants interactive, the venue ideal and I was honoured to be a part of it in my final year with Kidney Research UK.

**Tim Goodship**

Immediate past Chair of the Board of Trustees,  
Kidney Research UK

**T**he 15th annual Kidney Research UK Fellows Day took place at the Exhibition Centre, University of York on 14–15 September 2015, chaired by Adrian Woolf, Professor of Paediatric Nephrology at the University of Manchester, Honorary Consultant in Paediatric Nephrology at Royal Manchester Children's Hospital and Kidney Research UK Trustee. The relaxed and community-feel atmosphere gave the researchers supported by the charity an exclusive opportunity to showcase their work.

The packed programme comprised a mixture of short oral presentations, poster presentations and keynote talks. All presentations highlighted the exciting advancements being achieved in kidney disease research and patient care.

### **A broad mix of attendees and presentations**

This year's event provided a unique opportunity for researchers to present their work to a mixed

audience, including patients, industry partners, undergraduate medical students and established clinical and non-clinical researchers. The 90 delegates had the opportunity to listen to a variety of research presentations and, importantly, network and interact with colleagues, Kidney Research UK staff and members of the charity's Lay Advisory Committee.

The diversity of topics was reflected by the inspirational keynote presentations from senior researchers, as well as an industry and a patient representative.

Professor Jennifer Southgate from the Jack Birch Unit of Molecular Carcinogenesis, University of York, presented her research exploring alternative procedures for bladder reconstruction, involving cell therapy, biomaterials and tissue engineering. Her current work, which is looking to translate the findings from her research to help babies born with bladder exstrophy, is particularly exciting.

Dr David Long, current holder of a Kidney Research UK senior non-clinical fellowship to establish

his own research group at the University College London Institute of Child Health, described his work on renal microvasculature and the therapeutic potential of vascular growth factors in polycystic kidney disease (PKD). Dr Long's presentation inspired the participants to consider how fundamental basic science findings can be translated into new treatment strategies to help patients with renal disease.

Alan Salama, Professor of Nephrology at the University College London Centre for Nephrology, Royal Free Hospital, presented two main areas of investigation that are ongoing in his laboratory, giving an overview first of cryoglobulinaemic vasculitis and then of pauci-immune anti-neutrophil cytoplasm antibody (ANCA)-associated vasculitis, to demonstrate how basic research can translate into potential refinements and improvements for patient management.

Dr Hitendra Parmar, Interim Medical Manager at Otsuka Pharmaceuticals (UK) Ltd, discussed the challenges faced from an industry perspective, and how medical

research and pharmaceutical companies should be working together for the benefit of patients and science.

Keynote patient representative Patricia Gooden gave a moving account of her experience of living with kidney disease, as well as her charitable work with Kidney Research UK (see page 6).

### Cystic kidney disorders

The research talks began with Dr Maria Fragiadaki, a Thomas-Berry and Simpson Fellow at the University of Sheffield, who presented her work investigating the involvement of Janus kinase/signal transducer and activator of transcription (JAK/STAT) signalling in autosomal dominant PKD (ADPKD).

In ADPKD, mutated kidney cells divide abnormally, causing cyst formation. Abnormally activated nuclear proteins known as STATs have previously been shown to cause ADPKD. Dr Fragiadaki's research examined the mechanisms by which STAT signalling participates in ADPKD. Using both *in vitro*- and *in vivo*-based approaches, she showed that STAT5 is highly expressed and activated in both human and murine ADPKD kidneys, with a prominent nuclear expression pattern indicative of both early and late disease. Recent studies designed to directly inhibit STAT5 in an ADPKD mouse model have also been promising. The evidence that STAT5 is a strong positive regulator of pathogenic proliferation in ADPKD cells *in vitro* suggests that it may be a promising therapeutic target.

### Renal ciliopathies

Mutations that disrupt the structure and function of the cilium lead to phenotypically related syndromes called ciliopathies. Renal ciliopathies are the most common genetic causes of chronic kidney disease (CKD). Cystic kidney disorders such as PKD and nephronophthisis play a central role in the elucidation of ciliopathies, and practically all cilia-related disorders can express as renal cysts. Most patients with renal ciliopathy will progress to renal

failure and require dialysis or transplantation to survive.

Dr Shalabh Srivastava, a training fellow at the University of Newcastle, presented his work implicating aberrant hedgehog signalling as the cause of nephronophthisis.<sup>1</sup> His research investigated the disease mechanisms of patients with Joubert syndrome, an autosomal recessive ciliopathy affecting the brain, eyes and kidneys, which often leads to end-stage renal disease by puberty. Mutations in the *CEP290* gene are the most common genetic defects in patients with this syndrome. The exact role of *CEP290* in the sonic hedgehog pathway is still being elucidated. The sonic hedgehog pathway is essential for normal development and this signal is transmitted through the primary cilia. A real breakthrough is the move to using cultures from human urine-derived epithelial cells (HuRECs). Dr Srivastava showed how 3D HuREC cultures from *CEP290*-deficient patients with Joubert syndrome fail to form a spheroid structure (also called organoids) typical of wild-type cells; the mutant cells are characterised by the formation of organoids lacking an intact lumen and cilia. This defect in the mutant organoids can be partially rescued by purmorphamine, a sonic hedgehog agonist.

Cyst formation is a complex process, as exemplified by the ADPKD studies. Dr Srivastava believes that it is more likely that different pathways are involved at different stages of cyst formation – one being sonic hedgehog, the other being DNA replication stress – and that it is important to identify the pathways that can be exploited therapeutically.

### Inflammation and kidney disease

Cryoglobulinaemic vasculitis is an inflammatory disease that affects small blood vessels. In most cases, it is a secondary manifestation of other diseases, such as viral infections. In her oral presentation, Dr Gayathri Rajakaruna, a training fellow at the Royal Free Hospital in London,



## Chair of the Fellows Day 2015 Professor Adrian Woolf writes:

**A**s you read this report, you will appreciate the wide range of studies being supported by Kidney Research UK. You will see topics ranging from the bedside (such as looking at the quality of life of people with renal disease) to the application of science (such as seeking new biomarkers of renal disease) and fundamental research on the biological causes of kidney disease. The last topic is helping the community to design novel and intelligent therapies, bringing the discovery loop back around to kidney patients.

As well as hearing about the research funded by the charity, Fellows Day provided a flavour of the personal research journey of the presenters, be they medical students, training fellows or highly experienced research scientists. The more intimate atmosphere of the meeting enabled researchers to have face-to-face interactions with a wide range of stakeholders, including peers, kidney disease patients, industry partners and Kidney Research UK staff and trustees. The meeting was further enhanced by talks from our invited keynote speakers, who comprised a patient, two basic scientists, a clinician scientist, and a physician working in the pharmaceutical industry. I hope you enjoy reading about Fellows Day 2015 ■

described the results of a preliminary pilot study to investigate whether connective tissue growth factor (CTGF) antisense oligonucleotide (ASO) therapy attenuated cryoglobulinaemic vasculitis in comparison with control ASO. ASO drugs silence a specific mutant gene in order to inhibit expression of the defective protein. Based on her results, Dr Rajakaruna proposed that CTGF ASO provides a potential novel treatment for cryoglobulinaemia and its complications, specifically glomerulonephritis.

Following the theme of the association between viral infections and kidney disease, Mr Andrew Ross, a medical student from the University of Liverpool undertaking an intercalated degree, described his research based on the hypothesis that genetic differences in kidney tubule transporters may make some HIV patients taking the antiretroviral drug tenofovir more susceptible to kidney toxicity. Kidney disease is a potential complication for HIV-infected patients, especially those with non-infectious HIV-related co-morbidities. Moreover, some antiretroviral drugs (including tenofovir) have been associated with kidney damage.

Mr Ross reported the results of a six-week study of 127 HIV patients treated with tenofovir at the Royal Liverpool Hospital, which aimed to determine whether a change in the *ABCC2* gene can predict which patients are susceptible to kidney injury. However, no observed association between genetic differences in the *ABCC2* gene and tenofovir-associated kidney dysfunction was detected; this could be due to the small sample size, so further studies are planned.

Dr Irundika Dias, a first-year postdoctoral fellow at Aston University, presented her research exploring the underlying causes of increased cardiovascular disease and outcomes of accelerated progression observed in people with CKD and periodontitis. Dr Dias analysed plasma samples from a cohort of 500 CKD patients for protein carbonyls and F2-isoprostanes using enzyme-

linked immunosorbent assay (ELISA) methods. Her work-in-progress suggests that oxidation in the circulating proteome and lipidome increases with increasing CKD severity, suggesting a possible mechanism for increased co-morbidity with periodontitis.

### MicroRNAs and biomarkers

Dr Laura Denby, a postdoctoral fellow at the University of Glasgow, presented her work investigating the potential of harnessing a signature of microRNAs as biomarkers of renal disease, in order to predict disease state and stage. This method could lead to the accurate prediction of disease stage (including fibrosis score) and potentially of those at high risk of progression.

## Dr Jenkins is investigating microRNA regulation of macrophage phenotype in the context of peritoneal fibrosis

Dr Denby used 17 historic biopsy-proven immunoglobulin A (IgA) nephropathy serum samples to identify the microRNAs. In addition, she tested the potential of this microRNA signature in a new group of 15 biopsy-proven IgA nephropathy patients. Results showed that a microRNA signature exists in patients with IgA nephropathy and this is associated with renal function and fibrosis. The simple and reproducible nature of the developed technology was clearly communicated, demonstrating that microRNAs have the potential to be good biomarkers.

Dr Robert Jenkins, a research fellow at the University of Cardiff, gave an oral presentation on Day 2. He started with a brief overview of the complications of peritoneal fibrosis in peritoneal dialysis (PD) patients. Peritoneal fibrosis is a major cause of treatment failure in PD and is linked to repeated episodes of infection-driven peritoneal

inflammation. The predominant cell type present in PD effluent is the macrophage. Macrophages are a heterogeneous population of immune cells, essential for immune surveillance, response to infection and the resolution of inflammation. Dr Jenkins is investigating microRNA regulation of macrophage phenotype in the context of peritoneal fibrosis. He has used an established murine model of peritoneal fibrosis to profile microRNA expression in discrete macrophage subsets, namely tissue resident and inflammatory. Dr Jenkins is currently determining the functional significance of individual microRNAs, their effects on macrophage phenotype and ultimately on peritoneal fibrosis.

### Imaging the kidney

Mr Fábio Nery, a PhD student from University College London, described the results of his unique research project on the optimisation of 3D image-acquisition schemes for renal perfusion measurement. His poster reported the recent progress in understanding the problems associated with image artefacts as a result of patient motion in multi-shot MRI scans. His research thus far has shown that MRI acquisition schemes can be optimised by using single-shot, rather than multi-shot, acquisitions. This minimises the time taken to image the whole kidney, thus reducing the time the patient has to remain motionless.

### Blood flow in the kidney

Dr Chris Neal, a research assistant on an innovation grant at the University of Bristol, kick-started the second day of the meeting by presenting a poster on the novel microvasculature and haemodynamics in human glomeruli. U-bends, kinks, S-shaped branching points and a spiral course were reconstructed in afferent arterioles, indicating a bending or winding afferent arteriole course. Bends or spiral courses could aid flow distribution into the conduit vessels at the afferent vascular chamber edge, while the S-shaped branching points and U-bends may decrease blood flow during transient

## » Best Poster Presentation Award



■ Best Poster Presentation Award 2015: Dr Roslyn Simms (University of Sheffield)

**Dr Roslyn Simms**, who had completed a joint Medical Research Council/Kidney Research UK fellowship in 2011 and is now a clinical lecturer at the University of Sheffield, won the Best Poster Presentation Award for her poster, which was entitled 'Increased Psychosocial risk, depression and reduced quality of

life living with polycystic kidney disease' and showcased her research into psychological aspects and quality of life (QoL) in patients with ADPKD. Her excellently presented poster was praised by the judges, who also recognised the contribution her research would make towards improving health and support of patients with kidney disease.

Approximately 50% of patients diagnosed with ADPKD will reach end-stage renal failure (ESRF) by the age of 60. However, the psychosocial impact of living with ADPKD is poorly understood and a lack of published data on QoL exists in this area. Following a landmark QoL trial, Dr Simms presented psychosocial analysis data, showing that 72% of patients with ADPKD have concerns about progressing to ESRF and 62% feel guilty about the risk of passing ADPKD to a child.

Dr Simms also highlighted the current lack of validated psychosocial patient-reported outcomes for ADPKD in Europe; moreover, in non-European studies, pre-dialysis patients with ADPKD have not been found to score differently from the general population with standardised questionnaires evaluating QoL.<sup>2</sup> Dr Simms combined three different questionnaire measures for QoL, depression and perceived social support, and modified an existing genetic psychosocial risk instrument (GPRI)<sup>3</sup> to create the GPRI-ADPKD.<sup>4</sup>

The study sample consisted of 349 patients from Yorkshire who had ADPKD and were not receiving renal replacement therapy. The cohort included a wide range of ages, reflective of the general population. A response rate of 53% was achieved, which is consistent with the type of study. The lives of many of the patients had been significantly affected by ADPKD, with 37% having lost a close family member to the disease. Dr Simms showed the statistically significant correlation between the decline in kidney function and/or increase in kidney size with patient-

reported decreased QoL, increased depression and increased psychosocial risk. A UK-wide survey with an increased number of ADPKD patients is now planned. Dr Simms' findings have identified clear needs for improving the recognition and provision of support services for renal patients within the UK ■

## » Trevor Cook Award

The Trevor Cook Award was introduced by Kidney Research UK in 2014 in honour of Trevor Cook, the past Chair of the Kidney Research UK England and Wales Lay Advisory Committee. As well as an inspirational leader of this committee, Mr Cook was a renal patient. He sadly passed away in 2013.

This year's Trevor Cook Award was won by **Dr Roslyn Simms**. The Lay Advisory Committee nominated Dr Simms for this award for her skills in communicating her research in a way that was accessible for a mixed audience and appealed to the lay and patient delegates. Her recently published work provides, for the first time, insight into the perceived social support and psychosocial risk of an ADPKD diagnosis ■

## » Best Oral Presentation Award

**Miss Roisin McCormack**, a medical student from the University of Aberdeen undertaking an intercalated degree, won the Best Oral Presentation Award for her talk, entitled 'A retrospective cohort study of polypharmacy and medication adherence in chronic kidney disease patients', during which she gave a very clear and compelling description of this important issue.

The prevalence of CKD in the UK is estimated to be 6%.<sup>5</sup> Polypharmacy is common in CKD and is associated with medication non-adherence. In the past 15 years, the number of prescriptions of multiple medications has doubled.<sup>6</sup> The aim of this research was to explore medication adherence in CKD patients and determine whether polypharmacy is associated with medication adherence in this group of patients.

The retrospective cohort study used anonymised patient data from general practices across Scotland. The population comprised pre-dialysis adult CKD patients (stages 3–5) not receiving renal replacement therapy. Adherence was assessed for a one-year period from first prescription date. A large representative cohort of 16,110 mainly elderly, predominantly female patients with co-morbidities was assessed, and a proxy tool for medication behaviour was used to estimate adherence to angiotensin-converting enzyme (ACE) inhibitors. Results showed that one in five patients were non-adherent, which is consistent with reported values for CKD non-adherence in the literature. After adjusting for covariates, a statistically significant association between polypharmacy and better adherence to ACE inhibitors was observed. In addition, non-adherent patients were 17% less likely to experience polypharmacy. These results suggest, in contrast to the evidence base in other settings, that polypharmacy improves medication adherence in CKD patients ■



■ Best Oral Presentation Award 2015: Miss Roisin McCormack (University of Aberdeen)

hypertension and reduce high-pressure insults to the glomerular filtration barrier.

### Lifestyle management

Miss Danielle Richler-Potts, a medical student undertaking an intercalated degree at the University of Leicester, presented her poster entitled 'Physical Function and capacity is associated with cardiovascular health, body composition and quality of life in renal transplant recipients'. Her study revealed that South Asian renal transplant recipients (RTRs) have decreased functional ability and increased body fat compared with White RTRs – a trend that is consistent with ethnic differences in the general population. The association observed between an increase in fat-free mass and superior cardiac function further highlights the need to manage post-transplant weight gain, and also that muscle mass is important in the RTR population.

Miss Amy Clarke, a research psychologist and PhD student at the University of Leicester, gave an oral

presentation on the development of programmes to help patients with kidney disease enjoy an active lifestyle. Evidence suggests that the more active these patients are, the better they do. Despite the known benefits, however, the incorporation of physical activity and exercise into routine care is still relatively slow. Lifestyle interventions such as

## Patricia Gooden believes that information is key, as patients need to be able to make informed choices

education and motivation might provide a flexible and cost-effective way to tackle physical inactivity in this patient group. The aim of Miss Clarke's research is, therefore, to develop a co-designed, self-directed and evidence-based behaviour change intervention to increase walking in patients with CKD (stages 3–4). Because behaviour

change is multifaceted and difficult to replicate, she used the Medical Research Council's framework to guide the development of this complex intervention. Her study will provide fit-for-purpose interventions to promote physical activity behaviours in patients with CKD that are ready to be evaluated in future randomised controlled trials.

### 'My journey' – a patient's perspective

Following a late diagnosis of diabetes during her second pregnancy in 1993, patient representative Patricia Gooden required immediate dialysis for kidney failure. In her heart-warming talk, she depicted her experience of living with diabetes and kidney disease – the highs and lows she faced before and after kidney transplant, and the social isolation she felt when she lost her job due to a deterioration in physical health. The lack of information she received when her condition was first diagnosed two decades ago, as well as the inadequate patient support at that time, have spurred Miss Gooden to become a kidney disease ambassador at the Royal Free Hospital and a community champion for Kidney Research UK, so that she may encourage, represent and listen to other renal patients. She also discussed the improvements in resources and patient information that she has seen over the years.

Patricia Gooden believes that information is key, as patients need to be able to make informed choices. Focus groups and informal sessions in hospitals are a great way of helping patients to better manage their illness.

Miss Gooden's talk showed the reality for patients dealing with the day-to-day burden of kidney disease, and her positive



■ Patricia Gooden is passionate about the work of Kidney Research UK and plays an active role in the charity as a member of the Lay Advisory Committee, community champion and fundraiser. Her positive attitude towards life and her illness also makes her an invaluable ambassador of the patient support team at the Royal Free Hospital in London

outlook on her life and illness resonated with the audience. She acknowledged that her family and faith, as well as a 'top surgeon', have been very important to her on the road to recovery.

## Conclusion

This year's Fellows Day was a great success, as demonstrated by the high quality and diversity of the research presented, along with the calibre of questioning and discussion following each presentation. As ever, the unique atmosphere of Fellows Day provided an intimate environment for discussion and networking with colleagues, patients and Kidney Research UK staff.

The message that patient involvement and public awareness are integral to what Kidney Research UK does was also communicated clearly throughout the meeting. The scientific quality and range of presentations has increased year-on-year, demonstrating the investment made by Kidney Research UK in key areas of renal research ■

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## ■ Dr James Fotheringham's highlights

James Fotheringham PhD,  
Post-CCT Fellow in Renal Medicine,  
Sheffield Kidney Institute

**K**idney Research UK funded my PhD between 2010 and 2013, but I've kept coming to their Fellows Days. Undoubtedly, I feel I owe them a debt of gratitude for funding my research and I try to honour this in a number of ways. I believe in what the charity represents and hearing about the research funded inspires me to continue my own research.

Kidney Research UK recognises the UK renal research community's strengths, investing repeatedly in these areas. In addition, it was clear that the charity was branching into new areas. Here are my highlights.

### PKD/ADPKD

Kidney Research UK's track record of funding in this area is clearly paying off, with Maria Fragiadaki telling us about STAT5. It's rare that I get excited about laboratory research, but having picked up STAT5 in small interfering RNA screening Maria found it in human and rodent ADPKD kidneys and showed inhibition reduced cyst growth. I'm sure a high-impact paper will follow.

### Exercise in CKD

This is a new area for the charity, and the Leicester Kidney Exercise Team presented their research on assessing CKD patients for exercise interventions and the interventions themselves. Exercise has an important place in my life, but I recognise the many individual considerations and barriers that Danielle Richler-Potts identified, and which Amy Clarke is designing an intervention to tackle. A tailored package backed up by evidence applicable to the heterogeneous CKD population is just around the corner.

### Peritoneal fibrosis in PD

Again, Kidney Research UK recognises this priority area for



dialysis patients in terms of keeping them on their chosen modality. Strong presentations from Robert Jenkins and Anne-Catherine Raby showed progressive approaches to sequencing microRNAs to understand macrophage phenotypes, and toll-like receptor-mediated fibrosis, respectively. With every new avenue, there is a potential new target!

I'm still at the beginning of my research career and relationship with the charity, but I've seen Fellows Day change over the last five years. One funding area I've seen grow is the intercalated degree funding programme, where Kidney Research UK supports medical students during their research projects. These students have made important research discoveries and shown huge potential. We must retain them for the next generation of UK kidney researchers.

The inspiration doesn't just come from those presenting at Fellows Day. There are great minds in the audience who have no shortage of insight into how these new discoveries could be further understood or applied. My own research has taken new directions from feedback I've received at these meetings, and your Kidney Research UK-funded research could do too. Join us next year! ■

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## Programme details

### Chair

- **Professor Adrian Woolf**  
*University of Manchester and Royal Manchester Children's Hospital*

### Speakers

- **Dr Rosemary Bland**  
*University Hospitals of Coventry and Warwickshire NHS Trust*
- **Miss Amy Clarke**  
*University of Leicester*
- **Mrs Elaine Davies**  
*Kidney Research UK*
- **Dr Laura Denby**  
*University of Glasgow*
- **Dr Irundika Dias**  
*Aston University*
- **Dr Maria Fragiadaki**  
*University of Sheffield*
- **Ms Giulia Furini**  
*Nottingham Trent University*
- **Miss Frances Hughes**  
*Newcastle University*
- **Miss Patricia Gooden**  
*Patient representative*

- **Dr Jenny Hurcombe**

*University of Bristol*

- **Dr Robert Jenkins**

*University of Cardiff*

- **Dr Abigail Lay**

*University of Bristol*

- **Dr David Long**

*University College London*

- **Miss Roisin McCormack**

*University of Aberdeen*

- **Dr Chris Neal**

*University of Bristol*

- **Mr Fábio Nery**

*University College London*

- **Dr Hitendra Parmar**

*Otsuka Pharmaceuticals (UK) Ltd*

- **Dr Anne-Catherine Raby**

*Cardiff University*

- **Dr Gayathri Rajakaruna**

*University College London*

- **Miss Danielle Richler-Potts**

*Centre for Nephrology*

*University of Leicester*

- **Mr Andrew Ross**

*University of Liverpool*

- **Professor Alan Salama**

*University College London*

- **Dr Roslyn Simms**

*Centre for Nephrology*

- **Professor Jennifer Southgate**

*University of York*

- **Dr Shalabh Srivastava**

*University of Newcastle*

- **Dr Elisavet Vasilopoulou**

*University College London*

- **Miss Charlotte Waite**

*Institute of Child Health*

- **Miss Charlotte Waite**

*University of Sheffield*

### Static posters

- **Dr Anita Banerji**

*University of Leeds*

- **Mr Paolo Prosseda**

*University of Sheffield*

- **Dr Raina Ramnath**

*University of Bristol*

# UK renal research strategy

Mrs Elaine Davies, Director of Research Operations at Kidney Research UK, gave an update on the new UK renal research strategy that will be published early in 2016. Mrs Davies explained that the document encompasses 13 strategic aims laid out with commentary and pathways to achievement. Of note, the strategy aims to facilitate an open culture of collaborative research by encouraging robust engagement between all stakeholders, clinicians, researchers, industry, patients and the public, as well as service providers and commissioners. The strategy covers topics right across the research pathway. Many of the research studies presented at this year's Fellows Day will help drive that pathway, which is key to new fundamental discoveries and without which health improvements in the future are not going to be possible.

Mrs Davies encouraged participants to read the draft strategy and complete an online consultation survey. Access to the draft will be available from professional and patient organisations, and the aim of the survey is to capture thoughts and feedback from all stakeholders.

Mrs Davies commented that, at present, the steering committee is focusing on the launch of the strategy and measuring success will follow on afterwards.

## Grants and funding applications

Awareness of the available funding opportunities provided by Kidney Research UK was raised throughout the meeting.

Kidney Research UK offers a wide variety of funding schemes to support individual researchers, teams and resources, and welcomes the opportunity to discuss ideas for funding that might fit with its strategic priorities.

A new online application portal has now been implemented to improve the submission of applications and review process.

To apply online, visit  
[www.kidneyresearchuk.org/apply-for-funding](http://www.kidneyresearchuk.org/apply-for-funding)

For advice or more information about the application process, please contact a member of the Research Operations Team by emailing [grants@kidneyresearchuk.org](mailto:grants@kidneyresearchuk.org)