

IN BRIEF

BIOMARKERS

Urine hepcidin has additive value in ruling out cardiopulmonary bypass-associated acute kidney injury—an observational cohort study

Haase-Fielitz, A. *et al. Crit. Care* <http://dx.doi.org/10.1186/cc10339>

Hepcidin might be an early predictive biomarker that could be used to identify patients at increased risk of acute kidney injury (AKI) after cardiopulmonary bypass. Haase-Fielitz *et al.* found that urine hepcidin levels in the early postoperative period were three to seven times higher among patients who did not develop AKI than in patients with subsequent AKI.

MINERAL METABOLISM

No difference between alfacalcidol and paricalcitol in the treatment of secondary hyperparathyroidism in hemodialysis patients: a randomized crossover trial

Hansen, D. *et al. Kidney Int.* <http://dx.doi.org/10.1038/ki.2011.226>

A crossover trial has found that the vitamin D analogues alfacalcidol and paricalcitol are equally effective in the suppression of secondary hyperparathyroidism in patients on hemodialysis and neither increase calcium and phosphate levels above the desired range. Whereas alfacalcidol suppressed parathyroid hormone (PTH) throughout the entire range of PTH levels, paricalcitol was more efficient at correcting low than high PTH levels.

PEDIATRIC NEPHROLOGY

Risk factors associated with acute kidney injury in extremely low birth weight (ELBW) infants

Viswanathan, S. *et al. Pediatr. Nephrol.* <http://dx.doi.org/10.1007/s00467-011-1977-8>

A study designed to determine the incidence, risk factors and outcome of acute kidney injury (AKI) in extremely low birth weight (ELBW) infants has found that increased mean airway pressure, decreased blood pressure and increased use of cefotaxime are associated with renal failure. ELBW infants with AKI had increased mortality, especially in the presence of oliguria.

PEDIATRIC NEPHROLOGY

Transition from pediatric to adult renal services: a consensus statement by the International Society of Nephrology (ISN) and the International Pediatric Nephrology Association (IPNA)

Watson, A. R. *et al. Kidney Int.* <http://dx.doi.org/10.1038/ki.2011.209>

A new consensus statement endorsed by the ISN and IPNA describes the ideal care of young patients during the time of transfer to adult nephrology services. The statement aims to provide a basis for the development of locally appropriate recommendations for clinical practice and highlights the necessity of good communication between pediatric and adult services to ensure a successful transition process.