Nature Reviews Nephrology **9**, 554 (2013); published online 20 August 2013;
doi:10.1038/nrneph.2013.158;
doi:10.1038/nrneph.2013.156;
doi:10.1038/nrneph.2013.155;
doi:10.1038/nrneph.2013.157

IN BRIEF

HAEMODIALYSIS

Testosterone levels and adverse outcomes in male patients on haemodialysis

Low serum testosterone levels may be a modifiable risk factor for adverse outcomes and poor quality of life in male patients on haemodialysis, say researchers. In their unadjusted analysis of data from a cohort of male incident patients on haemodialysis ($n=623$), higher serum testosterone levels were associated with a significantly decreased risk of death during a median follow-up of 20 months. In their adjusted analyses, low serum testosterone levels were associated with a significant trend towards increased all-cause mortality and with significantly lower Health Utility Index scores.

Original article Bello, A. K. *et al*. Serum testosterone levels and clinical outcomes in male hemodialysis patients. *Am. J. Kidney Dis.* doi:10.1053/j.ajkd.2013.06.010

RISK FACTORS

Low haemoglobin levels may predict renal graft loss

New data suggest that anaemia might be an independent risk factor for renal graft loss. In their retrospective study, Pascual *et al*. found that after adjustment for glomerular filtration rate, low levels of haemoglobin at 1 month after transplantation were an independent predictor of graft loss—but not of mortality—in 639 kidney transplant recipients.

Original article Pascual, J. *et al*. Early-onset anemia after kidney transplantation is an independent factor for graft loss: a multicenter, observational cohort study. *Transplantation* doi:10.1097/TP.0b013e31829f162e

MINERAL METABOLISM

Efficacy of AMG 416 in patients with secondary hyperparathyroidism on haemodialysis

The calcium-sensing-receptor agonist, AMG 416, has previously been shown to lower plasma parathyroid hormone levels in uraemic animals and in healthy individuals. Now, researchers report that treatment with the agent was well tolerated and resulted in dose-dependent decreases in the levels of serum parathyroid hormone, fibroblast growth factor 23 and serum calcium in 28 patients with secondary hyperparathyroidism on haemodialysis. They conclude that AMG 416 therapy may be a novel way of treating secondary hyperparathyroidism in haemodialysis patients.

Original article Martin, K. J. *et al*. AMG 416 (velcalcetide) is a novel peptide for the treatment of secondary hyperparathyroidism in a single-dose study in hemodialysis patients. *Kidney Int.* doi:10.1038/ki.2013.289

TRANSPLANTATION

sFlt1—an independent risk factor for delayed graft function?

Inhibition of the antiangiogenic factor soluble Fms-like tyrosine kinase-1 (sFlt-1) might improve renal transplantation outcomes, say researchers. Chapal *et al*. found that during the first week after transplantation, sFlt-1 levels increased 2–3-fold in 136 renal transplant recipients. The increase in sFlt-1 levels was greater in recipients of deceased-donor grafts than in recipients of living-donor grafts, and peak plasma sFlt-1 levels ≥250 pg/ml were associated with a 2.5-fold increase in the risk of delayed graft function, and with early loss of peritubular capillaries.

Original article Chapal, M. *et al*. Increased soluble Flt-1 correlates with delayed graft function and early loss of peritubular capillaries in the kidney graft. *Transplantation* doi:10.1097/TP.0b013e31829f4772