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## IN BRIEF

### ACUTE KIDNEY INJURY

#### AKI is a risk factor for elevated blood pressure

Findings from a retrospective cohort study show that acute kidney injury (AKI) is an independent risk factor for subsequent development of elevated blood pressure. In a study of adults who were hospitalized between 2008 and 2011, 2,451 of 43,611 patients developed AKI as defined by changes in serum creatinine level. AKI was independently associated with a 22% (95% CI 12–33%) increase in the odds of developing elevated blood pressure, defined as >140/90 mmHg, during follow-up.

**Original article** Hsu, C.-Y. *et al.* Elevated BP after AKI. *J. Am. Soc. Nephrol.* doi:10.1681/ASN.2014111114

### TRANSPLANTATION

#### Fc-silent anti-CD40 antibody prolongs allograft survival

Blockade of the CD40–CD154 pathway prolongs renal allograft survival in nonhuman primates, but anti-CD154 antibodies are associated with thromboembolic complications and anti-CD40 antibodies are associated with varying degrees of B-cell depletion. To assess the contribution of B-cell depletion to allograft survival, researchers from Novartis Institutes for Biomedical Research assessed the effects of an Fc-silent anti-CD40 monoclonal antibody, CFZ533, in nonhuman primates. CFZ533 was well tolerated and prolonged allograft survival in the absence of B-cell depletion. The researchers suggest this antibody could have therapeutic utility in clinical transplantation.

**Original article** Cordoba, F. *et al.* A novel, blocking, Fc-silent anti-CD40 monoclonal antibody prolongs nonhuman primate renal allograft survival in the absence of B cell depletion. *Am. J. Transplant.* doi:10.1111/ajt.13377

### GENETICS

#### Clinical correlates of *APOL1* risk genotypes

An analysis of clinical and genomic datasets from the NEPTUNE study has revealed that individuals with a high-risk *APOL1* genotype present with more advanced renal disease and have less remission of proteinuria over time, independent of histologic diagnosis, compared to those with a low-risk *APOL1* genotype. Sampson *et al.* also identified a set of transcripts that were associated with the high-risk genotype that indicate activation of innate immunity pathways and inflammation.

**Original article** Sampson, M. G. *et al.* Integrative genomics identifies novel associations with *APOL1* risk genotypes in black NEPTUNE subjects. *J. Am. Soc. Nephrol.* doi:10.1681/ASN.2014111131

### POLYCYSTIC KIDNEY DISEASE

#### Predicting renal survival in ADPKD

A new prognostic model has been developed to predict renal outcomes in patients with autosomal dominant polycystic kidney disease (ADPKD). The PROPCKD algorithm uses a scoring system based on genetic and clinical data to assign risk categories corresponding to the predicted age of onset of end-stage renal disease. The researchers believe this model will enable a personal approach to clinical decision making in patients with ADPKD.

**Original article** Corneec-Le Gall, E. *et al.* The PROPCKD score: a new algorithm to predict renal survival in autosomal dominant polycystic kidney disease. *J. Am. Soc. Nephrol.* doi:10.1681/ASN.2015010016