IN BRIEF

CHRONIC KIDNEY DISEASE

Aspirin resistance in patients with chronic renal failure

Tanrikulu, A. M. *et al. J. Nephrol.* doi:10.5301/JN.2011.6259

Among 245 patients with chronic renal failure, 34.7% had aspirin resistance, compared to only 16.9% of patients with normal renal function. Aspirin resistance is linked to poor prognosis in patients with renal failure; also, renal failure is associated with an increased risk of cardiovascular disease. Taken together, these findings suggest that aspirin resistance may exacerbate cardiovascular risk in patients with chronic renal failure.

RISK FACTORS

Associations of blood lead with estimated glomerular filtration rate using MDRD, CKD-EPI and serum cystatin C-based equations

Spector, J. T. *et al. Nephrol. Dial. Transplant.* doi:10.1093/ndt/gfq773

Environmental lead exposure might be a risk factor for chronic kidney disease. Researchers report that high blood lead levels correlated with decreased estimated glomerular filtration rates in 3,941 adults included in the 1999–2002 National Health and Nutrition Examination Survey cystatin C subsample. The findings were most striking when glomerular filtration rates were estimated from creatinine as well as cystatin C levels.

STEM CELLS

Identification of adult nephron progenitors capable of kidney regeneration in zebrafish

Diep, C. Q. *et al. Nature* **470**, 95–100 (2011)

Nephron-regenerative therapies for humans might one day be possible, according to US researchers. Diep *et al.* identified nephron progenitors in adult zebrafish, and demonstrated that these cells generated new nephrons after both niche transplantation and kidney injury. The characteristics of these progenitors suggested that they were stem cells. Human counterparts of these cells might already exist or could be engineered.

RISK FACTORS

Associations between acute kidney injury and cardiovascular and renal outcomes after coronary angiography

James, M. T. *et al. Circulation* **123**, 409–416 (2011)

In a retrospective study of 14,782 patients who underwent coronary angiography, researchers found that postprocedural acute kidney injury is a significant risk factor for long-term mortality, hospitalization for cardiovascular and renal events, and end-stage renal disease. These findings may help to resolve the ongoing debate over whether acute kidney injury occurring in patients after percutaneous coronary revascularization is associated with long-term adverse outcomes, in addition its known association with early mortality.