Nature Reviews Nephrology **8**, 62 (2012); published online 10 January 2012;
doi:10.1038/nrneph.2011.199;
doi:10.1038/nrneph.2011.200;
doi:10.1038/nrneph.2011.201;
doi:10.1038/nrneph.2011.202

IN BRIEF

CHRONIC KIDNEY DISEASE

Assessment of two risk categorization systems for CKD

An alternative classification system to determine severity of chronic kidney disease (CKD), using both estimated glomerular filtration rate (eGFR) and proteinuria, has been compared with the NKF–KDOQI system that primarily uses eGFR. Inker *et al.* compared these systems in participants of NHANES with and without various complications. They found that participants without the complications were more likely to be reclassified more appropriately to lower CKD stages using the alternative system, whereas the NKF–KDOQI system better classified patients with concurrent CKD complications.

Original article Inker, L. A. *et al.* Comparison of concurrent complications of CKD by 2 risk categorization systems. *Am. J. Kidney Dis.* doi:10.1053/j.ajkd.2011.09.021

TRANSPLANTATION

Use of kidneys from donors at increased infectious risk

Data regarding transmission of viral illnesses from donor organs to recipients during transplantation are lacking. A study comparing outcomes of recipients of high-risk donor kidneys with those who elected to wait for a non-high-risk kidney found that delayed graft function, serum creatinine levels, death-censored graft survival and patient survival did not differ between the two groups. No donor-related transmission of viral infection was reported. Importantly, recipients of high-risk kidneys had a significantly shorter waiting list time than recipients of non-high-risk kidneys.

Original article Lonze, B. E. *et al.* Outcomes of renal transplants from Centers for Disease Control and Prevention high-risk donors with prospective recipient viral testing: a single-center experience. *Arch. Surg.* **146**, 1261–1266 (2011)

BASIC RESEARCH

Involvement of heparanase in diabetic nephropathy

Heparanase may be a new therapeutic target in diabetic nephropathy, report investigators of a new study. Increased expression of heparanase is associated with loss of heparan sulfate, a major component of the glomerular basement membrane. This new research showed that deletion of the heparanase gene protected mice from diabetic nephropathy, and that a heparanase inhibitor decreased renal damage and albuminuria in mouse models of diabetic nephropathy.

Original article Gil, N. *et al.* Heparanase is essential for the development of diabetic nephropathy in mice. *Diabetes* doi:10.2337/db11-1024

ANEMIA

Cause of increased risk of stroke related to darbepoetin alfa still uncertain

A new analysis of TREAT shows that baseline characteristics and postrandomization factors do not explain the increased incidence of stroke in patients assigned to darbepoetin alfa. Baseline characteristics that predicted the risk of stroke in the overall TREAT population did not modify the risk of stroke associated with darbepoetin alfa in interaction analyses. Similarly, postrandomization factors, including blood pressure, hemoglobin levels, platelet count and treatment dose, did not explain the increased risk of darbepoetin alfa-related stroke.

Original article Skali, H. *et al.* Stroke in patients with type 2 diabetes mellitus, chronic kidney disease, and anemia treated with darbepoetin alfa: The Trial to Reduce Cardiovascular Events with Aranesp Therapy (TREAT) Experience. *Circulation* doi:10.1161/CIRCULATIONAHA.111.030411