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## IN BRIEF

### CHRONIC KIDNEY DISEASE

#### eGFR and albuminuria are associated with risk of VTE

The risk of venous thromboembolism (VTE) is increased with mild to moderate chronic kidney disease in the general population, show researchers. Data from 95,154 individuals showed that the risk of VTE started to significantly increase in the normal range of estimated glomerular filtration rate (eGFR) and albumin-to-creatinine ratio (ACR) (eGFR 88 ml/min/1.73 m<sup>2</sup> and ACR ≥14 mg/g). eGFR and albuminuria were associated with the risk of VTE independently of each other and cardiovascular risk factors.

**Original article** Mahmoodi, B. K. *et al.* Association of mild to moderate chronic kidney disease with venous thromboembolism: pooled analysis of five prospective general population cohorts. *Circulation* doi:10.1161/CIRCULATIONAHA.112.113944

### GENETICS

#### Integrating biological knowledge and GWAS data

In order to identify novel genetic candidates associated with estimated glomerular filtration rate (eGFR), Chasman *et al.* integrated existing genome-wide association study (GWAS) data with independent biological knowledge. By focusing on single nucleotide polymorphisms in genes connected by functional evidence to genes near previously validated eGFR associations, the researchers identified six new genes related to kidney function, some of which had no known connections to kidney-specific pathways.

**Original article** Chasman, D. I. *et al.* Integration of genome-wide association studies with biological knowledge identifies six novel genes related to kidney function. *Hum. Mol. Genet.* doi:10.1093/hmg/dd369

### PAEDIATRICS

#### Experience of concurrent peritoneal dialysis and VPS

The experience of 135 centres participating in the International Pediatric Peritoneal Dialysis Network with regard to children with ventriculoperitoneal shunts (VPS) on peritoneal dialysis has been collated to inform best practice. Among the 18 patients with concurrent VPS and peritoneal dialysis catheters, the peritonitis rate was one in 19.6 months. No infections or complications of catheter dysfunction were reported, suggesting that VPS should not preclude peritoneal dialysis in children.

**Original article** Dolan, N. M. *et al.* Ventriculoperitoneal shunts in children on peritoneal dialysis: a survey of the International Pediatric Peritoneal Dialysis Network. *Pediatr. Nephrol.* doi:10.1007/s00467-012-2303-9

### VASCULITIS

#### Biomarkers for staging ANCA-associated vasculitis activity

A study has identified novel biomarkers that distinguish between active antineutrophil cytoplasmic antibody (ANCA)-associated vasculitis (AAV) and remission. Monach *et al.* measured levels of 28 serum proteins in patients before and 6 months after treatment in a large clinical trial of AAV. Data from the 137 patients in remission at month 6 showed that levels of 24 of the biomarkers were significantly different to levels at screening. CXCL13, MMP-3 and TIMP-1 were the biomarkers that best discriminated between active disease and remission.

**Original article** Monach, P. A. *et al.* Serum proteins reflecting inflammation, injury and repair as biomarkers of disease activity in ANCA-associated vasculitis. *Ann. Rheum. Dis.* doi:10.1136/annrheumdis-2012-201981