KIDNEY RESEARCH INSTITUTE

A collaboration between
Northwest Kidney Centers and UW Medicine

ON THE HORIZON

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KRI Fellow Dr. Simon Hsu published in CJASN

KRI Fellow Dr. Christine Limonte awarded 2021-22 American Kidney Fund Clinical Scientist in Nephrology Fellow

Expanding through patient-centered collaborations

A message from the director

DR. JONATHAN HIMMELFARB

2021 has brought new and exciting collaborative opportunities to the KRI; these opportunities have allowed us to expand the way we support patients and do research.

Inside, you'll read about a new opportunity to support kidney transplant recipients. Dr. Christopher Blosser was recently awarded a grant from the Kuni Foundation that will help study and provide support to kidney transplant patients who develop cancer. In partnership with Seattle Cancer Care Alliance and University of Washington Transplant, Dr. Blosser is establishing a clinic to support these patients, and will also launch the first nationwide bioregistry for kidney transplant recipients who develop cancer as a complication of immunosuppression.

In a joint effort with Northwest Kidney Centers (NKC), the KRI recently launched a new study at NKC dialysis units to learn about the impact of blood sugar on patients on dialysis. KRI investigators continue to share the results of their findings broadly from our many active research projects, with the hope of improving patient care and affecting clinical outcomes. Dr. Kate Butler, one of our talented young investigators, published her findings on clinical care for patients who undergo evaluation for kidney transplants in JAMA Internal Medicine.

Glenda Roberts has expanded the KRI's national contribution to patient activation and engagement by serving as the sole patient representative on the American Society of Nephrology's COVID-19 Response Team and Transplant Subcommittee. Their work is providing critical support to the nephrology and patient community during the pandemic.

In response to the ongoing pandemic, the KRI continues to keep our research participants and study staff safe, and are appreciative that we can continue to support kidney patients and the nephrology community during this time.

TRANSFORMING LIVES THROUGH INNOVATION AND DISCOVERY

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Dr. Christopher Blosser launching new clinic and registry for kidney transplant candidates and recipients

Dr. Christopher Blosser, UW Medicine transplant nephrologist, UW associate professor of Nephrology and director of the UW Transplant Fellowship

Dr. Christopher Blosser, director of UW Nephrology's transplant fellowship, was recently awarded a new grant from the Kuni Foundation, which will help study and provide support to kidney transplant candidates and recipients. The risk for cancer is 2-4 times higher in Solid Organ Transplant Recipients (SOTRs) and is the second leading cause of death. Cancer screening and treatment have markedly improved general population experience and outcomes. Yet, much of that knowledge has not been investigated or applied in SOTRs. Dr. Blosser has become an international expert on the intersection between cancer and solid organ transplant. Because of the unmet needs, he is establishing a Comprehensive Cancer & Transplant Consult Clinic as a partnership of experts at Seattle Cancer Care Alliance (SCCA) and UW Transplant to provide expert consultation for pre- and post-transplant patients with challenging cancer and transplant conditions. He anticipates serving patients from around the U.S., and potentially beyond when the doors open at the SCCA in Fall 2021.

While this clinic will apply the current state-of-the-art knowledge to patient care, more research needs to be performed to further understand and improve patients' lives. Therefore, Dr. Blosser is also creating a National Collaborative Cancer & Transplant Bioregistry to gather and integrate patient-reported and patient-related cancer and transplant data to enable multi-disciplinary clinical, epidemiological and translational research. This will be the only active national bioregistry of organ transplant recipients who develop cancer with patient-level data. The bioregistry, in conjunction with the new clinic, will integrate research and clinical care for kidney transplant candidates and recipients.

Dr. Blosser will put patients at the center of all activities. He plans to create and implement a Community Engagement Committee to inform and guide the clinic and bioregistry in their endeavors. Dr. Blosser and collaborators (including Drs. Bessie Young and Kate Butler) aims to gather patient-reported outcomes to help understand the patient experience and impact of post-transplant cancer, in addition to health and outcomes data. The clinic and bioregistry will also keep health equity at the forefront of its work. Dr. Blosser and his team will examine the association of social determinants of health and structural and institutional racism with specific cancer and transplant outcomes in SOTRs.

When asked about the importance of this project, Dr. Blosser noted "Patients who live with organ failure and require dialysis or a transplant are already dealing with many unknowns in their life and health. So, when cancer enters that person's life, there can be even more stress and a loss of control. This clinic and registry is focused on offering the world's best cancer and transplant care in a patient-centered model while addressing the many unanswered questions through research to further improve lives. Every patient deserves this commitment as they deal with some of the biggest challenges of their life."

The knowledge gained from Dr. Blosser's work will enable improved patient experience and outcomes.

NKC and KRI collaborate on new study on new device study with dialysis participants

The Northwest Kidney Centers (NKC) and the Kidney Research Institute (KRI) are collaborating on a new research study called BLOSSOM: Blood Sugar Sensing on Maintenance Dialysis. This 5-year study is the largest and most comprehensive research study on blood sugar in dialysis patients. The objectives of the study are to comprehensively define blood sugar in dialysis patients, and determine frequency and severity of low blood sugar and its clinical risk factors among dialysis patients with and without diabetes. The study will utilize continuous glucose monitoring (CGM) technology, specifically the DexCom G6 device. The DexCom G6 is an FDA-approved system that is the most accurate CGM system available, captures data for 10 consecutive days, and does not require calibration. The study team will collect thousands of glucose measurements in patients with and without diabetes, on home hemodialysis, in-center dialysis , as well as peritoneal dialysis. The information will be reported back to the study participants, their providers at NKC, dietitian and other care providers.

The Northwest Kidney Centers and the Kidney Research Institute hope this study will provide robust new information for science inform the needs for clinical care and build a foundation for intervention studies.

Lisa Anderson, lead BLOSSOM research coordinator

KRI's national impact expands: COVID-19 and kidney disease

Glenda V. Roberts, KRI Director of External Relations and Patient Engagement

KRI's Director of External Relations and Patient Engagement, Glenda V. Roberts, serves as the sole patient representative on two leadership groups organized by the American Society of Nephrology (ASN): the ASN COVID-19 Response Team (RT), and its Transplant Subcommittee. They were created to deliver COVID-19 education and guidance for kidney disease professionals in collaboration with the Center for Disease Control (CDC).

Dialysis and transplant patients are among the most vulnerable to COVID-19. Leveraging front-line experiences of kidney professionals nationwide, the Response Team curated treatments, therapies and strategies to produce the COVID-19 Toolkit for Nephrology Clinicians. COVID-19 also causes severe kidney damage in many healthy patients with no underlying kidney conditions. According to Glenda, "During the first surge, dialysis equipment shortages were almost as dire as ventilator shortages. Front-line professionals developed novel solutions. We ensured that nephrologists and hospitals nationwide were aware of these solutions for all patients."

The Response Team collaborates with US Department of Health and Human Services, the Centers for Disease Control, and the White House. The CDC's decision to add chronic kidney disease and organ transplants to the list of high-risk conditions is one outcome. Currently there is very limited data about the vaccines' impact on dialysis or transplant patients. Following consultation with Novavax, the vaccine manufacturer started a trial that includes CKD patients.

Webinars for the nephrology and healthcare communities have been popular. Glenda presented on mental health support for professionals, and "Adapting Practice to a Pandemic: Focus on Home Dialysis and Kidney Transplantation" during this year's virtual Kidney Week. She remarks "We continue to address hard problems, like escalating vaccine eligibility; seeking data about vaccines impact on transplant recipients; assessing the efficacy of therapies, like monoclonal antibodies; codifying long haul symptoms in CKD patients; and more." The Kidney Research Institute is proud that Glenda is representing the kidney patient community on these important national efforts.

Also in the news

- KRI Research Fellow Christine Limonte, MD, was awarded the **2021-22 American Kidney Fund Clinical Scientist in Nephrology Fellow,** which is a prestigious award given out to only one leading young kidney investigator nationwide.
- KRI Investigator Bessie Young, MD, has been appointed as the **new Associate Dean for Healthcare Equity** at the UW School of Medicine
- KRI Research Fellow Simon Hsu, MD, recently published **"Differences in 25-Hydroxyvitamin D Clearance by eGFR and Race: A Pharmacokinetic Study"** in JASN. KRI Investigators Leila Zelnick, Bryan Kestenbaum, and Ian de Boer are coauthors on the paper.
- Dr. Suzanne Watnick was one of eight winners in Round 1 of the **KidneyX COVID-19 Kidney Care Challenge** for her project "The 'Good Humoral' Immunity Truck And Freezer Project."
- Drs. Katherine Tuttle, Jonathan Himmelfarb, and Ian de Boer, together with Glenda V. Roberts and Ashveena Dighe, recently published **"Integrating Patient Priorities with Science by Community Engagement in the Kidney Precision Medicine Project"** in CJASN.
- Lori Linke and Drs. Nisha Bansal, Rajnish Mehrotra published the initial results of the BOLD study in the AJKD article **"Treating Home Versus Predialysis Blood Pressure Among In-Center Hemodialysis Patients: A Pilot Randomized Trial"**
- KRI Director Jonathan Himmelfarb, MD, is working with multiple NIH Institutes to study **COVID-19 related kidney injury** and develop strategies for prevention and treatment.
- Glenda V. Roberts received the **2020 President's Volunteer Service Award** for her national contributions to COVID-19 initiatives on behalf of patients living with kidney disease.
- **The 2020 Fialkow Scholar Award recipient is Dr. Beno Freedman.** The award, named in memory of the late UW Dean of Medicine Philip Fialkow, recognizes outstanding achievements made by a junior faculty member early in their careers in medical research, teaching and clinical. Beno plans to use the funds to support new therapeutic directions for kidney disorders.

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Dr. Kate Butler publishes new data on kidney transplant evaluation in JAMA Internal Medicine

Dr. Kate Butler, UW Division of Nephrology and Acting Instructor; Research Fellow, VA HSR&D

KRI Investigators Dr. Kate Butler and Dr. Ann O'Hare recently published their findings on clinical care for patients with advanced kidney disease who were referred for kidney transplant evaluation in JAMA Internal Medicine, a monthly peer-reviewed medical journal published by the American Medical Association.

Kidney transplant is a valuable treatment option for many people with advanced kidney disease. However, because donor kidneys are a scarce resource and not everyone is healthy enough to tolerate transplant, patients must first complete a physical and psychosocial evaluation and be selected and added to a national kidney waitlist by a transplant center. To get a better idea of what this evaluation process might be like for patients, the researchers performed a qualitative study using text from the electronic health records of a national sample of 211 adults with advanced kidney disease cared for in the Veterans Affairs Health Care System who were referred to a kidney transplant center. They found that the transplant evaluation process could be rigid, burdensome, and even risky for patients. Neither patients nor their local providers had much insight into the process or control over how it was conducted and they might be unsure of the rationale for decisions about candidacy from the transplant center.

Dr. Butler adds that "There's been a lot of great work focused on improving the way that we select people from the US national kidney waiting list for transplant, but this system can only be as effective and equitable as the up-stream processes that determine which patients are added to the waitlist in the first place. Our work suggests that it's important to look at the kidney transplant process as a whole from initial evaluation through waitlisting and transplant both to better support equity in resource allocation and also improve patient experience."

This work was supported by the UW Division of Nephrology's NIDDK T32 and a grant from the Veterans Administration Health Services Research and Development.