
WIN

September, 2000

WOMEN IN NEPHROLOGY

Newsletter

Editor: Patricia Preisig

Message from the President

In many ways, WIN has come of age in the past 5 years, maturing into a more structured organization able to sustain long-term commitments. Newly tax-exempt, with early success at fund raising, WIN is working with other national renal societies [the ASN (American Society of Nephrology), NKF (National Kidney Foundation), and the RPA (Renal Physician's Association)] to provide programs and initiatives that benefit not only women, but the entire Nephrology community. It has been my great honor and pleasure to be a part of this exciting evolution. Here are some of the highlights of the WIN Year 2000. See articles within the Newsletter for details on each of these highlights.

Focus on Professional Development: In 1999, WIN, led by Dr. Catherine Stehman-Breen, successfully launched with the ASN an annual **Professional Development Seminar** for women and men in early-middle career stages. This year the one-day Seminar will be held on **Thursday, October 12th during Renal Week @ ASN 2000**. Encourage your Fellows and colleagues to attend!

At the upcoming **Annual WIN Luncheon Meeting at ASN 2000**, Dr. Nancy Gary, one of WIN's founders, will address professional development strategies and opportunities now available to women in nephrology, a topic also of importance to Division heads and Training Program Directors committed to faculty development and career support. The luncheon will be held **Saturday, October 14th at 12:30 pm**.

Mentoring: The 2nd annual **Meet-A-Mentor Luncheon/Reception at ASN 2000** will facilitate linking mentors and mentees. This year the luncheon will be held on **Sunday, October 15th at 12:30 pm**, and will include a dynamic speaker plus time to visit and make connections. The WIN DataBase for members continues to grow, providing access to women renal physicians and scientists who seek mentoring relationships.

Nephrology Interest Groups: To address the looming national shortage of Nephrologists and to begin the mentoring process early, WIN has initiated a partnership with the ASN and the RPA to establish local Nephrology Interest Groups designed to encourage and support residents and medical students with an interest in Nephrology. Five ASN-funded Pilot Centers are now active. Additional interested cities/groups are needed to join the effort.

Scientific Programming: WIN remains committed to scientific programming that brings to the nephrology community issues relevant to women's health. At the NKF 2000 meeting, the annual WIN Symposium showcased evidence for fetal origins of adult hypertension and diabetes (the "Barker Hypothesis") with Dr. David Barker as lead speaker. At the ASN 2000 meeting, WIN will co-sponsor with the ASN a basic-science symposium on the effects of estrogen on the kidney and urogenital system.

ASN Government Relations: The ASN has acknowledged WIN in many positive ways, most recently by inviting WIN to provide a standing committee member for the ASN Government Relations Committee. Effective this year, each WIN Past President (currently Dr. Chris Abrass) will serve a 2-year term as a member of this key committee.

WIN/ASN Leadership Initiative: An estimated 15% of the ASN's Committee members are women, a figure very similar to the proportion of ASN members who are women. However, few women are moving into ASN leadership positions. WIN supports a two-pronged strategy. First, to identify talented women interested in these roles and, with the ASN Council support, promote opportunities for them to gain the experience in ASN committees and functions needed to advance. Second, to increase the number of women entering Nephrology (see Nephrology Interest Groups) and the number of women nephrologists participating in ASN functions (via active recruitment).

My experience serving as your President has brought me in touch with an amazingly talented and dedicated group of women physicians and scientists, who make me exorbitantly proud to be a woman in nephrology. I have been given a unique opportunity to contribute in ways that I believe can make a difference and to work creatively with - and learn from - gifted women with diverse expertise across a wide range of career stages. In this stimulating process, I have emerged from a largely unrecognized professional isolation to a wonderful sense of community and of collective empowerment. Together, we DO make a difference for our WIN colleagues, our local and national nephrology communities, and the women and men who will follow us. Thank you for the gift of your confidence. It has been an exhilarating journey!

Susan Bagby

1998-2000 WIN President

ASN - WIN Activities

Over the past 4 years, WIN has been fortunate to have solid support from the ASN Council in a number of endeavors. Communication with the ASN Council has been greatly facilitated by the WIN leadership's annual meeting with the ASN Council during Renal Week, as well as by interim meetings during the year with the ASN President to keep the ASN Council updated on joint projects. At the 1999 ASN Council Meeting, Drs. Susan Bagby and Chris Abrass presented a revised WIN proposal for activating 5 national Nephrology Interest Groups; the ASN Council subsequently approved this proposal, together with \$7500/center to support this joint activity. (See separate article on the progress of this project.) WIN also provided a preliminary report on the attendance at the first annual Professional Development Seminar, another joint WIN/ASN project literally in progress as the 1999 ASN Council met. WIN's approach at these meetings has been to develop and present proposals that will benefit both women and men in nephrology, while at the same time offering solutions to problems that WIN believes will most impact women's opportunities. In this way WIN has sought to be a constructive force in our interactions with ASN. At the 2000 ASN Council Meeting, WIN will discuss an ASN Leadership Initiative designed to prepare women interested in advancing within the ASN organizational structure to assume ASN leadership positions.

During the 1999 ASN, the ASN Council presented an award to Congresswoman Shelley Berkley from Nevada for her work on behalf of issues important to Nephrology. Dr. Susan Bagby, WIN President, was invited by Dr. Wadi Suki, then ASN Past President, to accompany Dr. Suki, Rob Morrison of ASN Government Relations, and Congresswoman Berkley on a tour of the ASN Exhibits and to discuss ASN priorities at the congressional level. This was an important opportunity for WIN, and Congresswoman Berkley was clearly interested in hearing about WIN's goals and priorities, and about nephrologic research that touches women's health issues.

Dr. Tom Hostetter, current ASN President, subsequently invited WIN to provide a standing member on the ASN Government Relations Committee, yet another valuable opportunity for WIN to play a constructive role in both framing and supporting political issues of importance to the Nephrology community. The WIN Council has approved a mechanism whereby the WIN past president will serve a 2-year term on this committee. Dr. Christine Abrass, currently WIN past president, is our first WIN representative in this exciting new endeavor.

For the past several years, the WIN President has been invited to join the ASN President and the Training Program Directors' Chair in welcoming the internal medicine residents who are attending the ASN as Travel Award recipients. This too is an excellent opportunity to let women residents interested in Nephrology know that WIN has a strong presence, is available to support their career needs, and is committed to doing so in a way that benefits all.

These interactions with the ASN leadership mark WIN's evolution to a new level of function, a new organizational paradigm that let's us make serious long-term commitments that well serve the women in our profession. And it is to the credit of the ASN Council that they have supported this evolution and provided WIN many opportunities to contribute. WIN looks forward to continued constructive interactions and joint efforts with the ASN.

The WIN Database is *Ready for Your Use!!!*

The WIN DataBase is alive and well! It contains detailed information on most of our members. You can help expand the Database by submitting your data form, if you have not done so, and by recruiting members to WIN. Also remember that the database can be revised, so please let WIN know if any of your information has changed.

However, the database is only useful when it is used. So think of the WIN Database when you need the name of a women to:

Recommend for a committee position
Invite as a visiting professor
Recommend as a speaker at a conference or meeting
Generate mailing lists for conferences and events.

Let the WIN leadership know if they can help you find qualified women for participation in any of your programs or events.

Send your queries and updated information to: Chris Abrass, MD at cabrass@u.washington.edu

Books of Potential Interest

(Chris Abrass)

The following books fit a theme of

**Cultural Competence and Effective Communication:
Importance to Health Care and the Status of Women**

***The Spirit Catches You and You Fall Down*
By Anne Fadiman**

This is a wonderful book about a husband-wife team of primary care physicians in Merced, California and the youngest child of an immigrant Hmong family who has seizures. The clash of cultures, differences in beliefs and acceptance of medical treatments, and the lack of translators contributes to frustration for the medical care providers and suspicions, fears and failure to follow the doctor's recommendations on the part of the family. The parents show incredible love for their child, but they are perceived by the medical profession to be incapable of caring for her. Ultimately, this leads to court ordered foster care. Although both the parents and physicians are extremely dedicated to the child's welfare, neither find a way to successfully communicate and collaborate to the benefit of the child. It is a poignant example of the need for cultural competence in medicine and the potential benefits of a diverse workforce. It has important lessons that can be generalized to failures of communication between men and women, or others of different viewpoints.

***A Thousand White Women: The Journals of May Dodd*
By Jim Fergus**

Written in the first person, this is a personal and poignant tale about the participation of one woman in a negotiated trade between President Grant and Chief Little Wolf of the Cheyenne people. A thousand horses were traded for a thousand white women. While the Cheyennes hoped to expand their population through childbearing women and save their people from destruction by the White man, the government hoped to manipulate the Cheyenne to move to reservations and to give up their land.

May Dodd, an educated, upper class woman from Chicago, defied her family by marrying a commoner. As punishment for disgracing her family, they had her committed to an insane asylum. May volunteered to be an Indian bride as her only means of escaping imprisonment, and in 1875 she headed to Nebraska. It is a beautiful tale of the meeting of two cultures, the contrasts between the good and bad elements of each, and the bravery of a young woman. The status and value of women in each culture are sharply contrasted. The White and Cheyenne women find many common bonds, and "tend and befriend" during crisis to prevent extinction of the Cheyenne. As May Dodd's grandchildren reflect on the status of the tribe and the changes that have occurred, the reader is reminded of the importance of cultural diversity.

***The Futures of Women: Scenarios for the 21st Century*
By Pamela McCorduck and Nancy Ramsey**

Using scenario building as a tool, they describe the political and economic pressures that may influence the status of women by the year 2015. The four possibilities are 1) backlash where women lose most of the rights they have gained in the 20th century, 2) the status quo, where there have been some gains and some losses, but essentially a zero sum game, 3) utopia where women are truly equal, and 4) doing just fine, but separate, thank you! A surprise is reading the "truly equal" setting and finding it a bit uncomfortable. It shows how well adapted/cultured we really are to "being put in our place." As the numbers of women in medicine grow, I see them building their own networks and "hanging out" together, so scenario 4 may not be so far fetched either. All in all, a very interesting book.

***What's Holding You Back?: 8 Critical Choices for Women's Success*
By Linda Austin**

The book reviews eight critical choices for women's success. It's a pleasant read based on the premise that we under-aspire and in that way limit our own potential. It is a very positive book with suggestion and inspiration to achieve your

NEPHKIDS IS GROWING AND GROWING

Nephkids is a piece of the NKF Cybernephrology Initiative, an exciting, multifaceted endeavor directed by Kim Solez, M.D., Univ of Alberta. The Initiative, which can be accessed from the NKF webpage, has sent teams to third-world countries to install computers and teach local physicians and health professionals how to participate in listservs, like Nephrol, and to access the National Library of Medicine search engines. Donated computers are also distributed to families of children with serious renal disease, so that the parents can participate in Nephkids and the children can participate in Kid Talk, a talk group for children and teens with renal disease, or Kid Talk II, a talk group for siblings of children with kidney disease. If you are interested in computer equipment, you can get more information at: www.renal-tech.org.

Nephkids has >200 members, ~ 85% parents, 15% health professionals. From around the world, parents discuss issues and feelings of common interest, and show on a daily basis how much we all have in common as human beings. The group generates 30-50 email messages a day, with any message sent to the group by a member being immediately distributed to the entire group. The messages are fairly evenly divided between medical questions and issues dealing with the emotional impact of chronic disease on the family. Our moderator group has recently been joined by Melissa Gregory, M.D., Rochester, NY, who has been a wonderful addition.

One parent, who is from Korea, unfortunately has two children with serious kidney disease, which are, as best we can tell, due to totally unrelated conditions. The son, 6 years old, received a transplant in February for what is likely renal dysplasia. His sibling, 2 years old, has a steroid-resistant nephrotic syndrome. As a result of my connection with the family through the group I went to Korea for a week in February as a visiting professor. I learned more than I taught. The group at Yonsei University in Seoul has done almost 2000 renal transplants since the late 1970's under the direction of Dr. Park, with excellent results. The majority of their transplants are living unrelated; Rarely a cadaver transplant is done, due to their cultural belief that the body must be buried or burned whole upon death.

Wooseok, the boy who was the focus of my visit, received a living unrelated kidney from a 27 year old mother of two young children. She had seen him on TV and immediately knew that she wanted to be his donor. She had lost her own mother to liver failure for lack of a donor organ, and is passionate about promoting transplantation. Though she and I had no language in common we were able to communicate and I found her a very inspiring lady.

In addition to its purposes of supporting and educating parents and caretakers of children with renal disease, Nephkid members here in the U.S. have lobbied members of Congress and state legislatures. We have also established a web page and are gradually increasing the information there. Our goal is that the web page become a major resource for pediatric nephrology families. The advantage of such a web page over writing a booklet is that we can update it with minimal effort and expense. The information can be printed by practitioners, parents, and patients anywhere in the world. Our URL is <http://cnserv0.nkf.med.ualberta.ca/nephkids>.

Susan B. Conley, M.D., List moderator

The Professional Development Seminar

Co-Sponsored by WIN and ASN

This year WIN will co-sponsor with the ASN the 2nd annual **Professional Development Symposium** at the 2000 ASN Meeting in Toronto. This year's symposium will be co-chaired by Drs. Catherine Stehman-Breen and Sharon Moe. The symposium is directed at fellows and faculty in the early stages of their careers. The goal is to provide information regarding career choices and tools that will promote a successful Nephrology career. Recognized authorities in the academic renal community have been recruited to talk on topics including career choice, grant writing, manuscript writing, mentoring, presentations, conflict management, and time management. The symposium also provides a venue for networking with more senior nephrologists.

Last year the symposium was quite successful, with more than 50 participants. Reviews from both participants and speakers were uniformly positive. This year, WIN will be offering 50 travel grants, and expects more than 70 participants. We anticipate repeating the symposium on an annual basis and hope to expand the topics to include those which are relevant to the professional needs of Nephrologists at later career stages. For more information, about the symposium contact Catherine Stehman-Breen MD by email at cos@u.washington.edu or phone at (206) 764-2002.

Recruiting New Members

The Membership Committee is focusing on both increasing the number of WIN members, and expanding the membership to include a broader distribution of women Nephrologists and basic scientists from academic, private practice, and industrial settings. **We, WIN members, are the best advocates for ourselves.** So.....please share this newsletter with women who are involved with Nephrology or renal physiology/pathology. Encourage them to contact Nancy Adams at 860-679-3129, or by, email at adams@nso.uchc.edu, or any WIN officer.

**Your efforts will go a long way
toward improving your society.**

The Goals of Women In Nephrology

To promote professional development and career opportunities
for women in nephrology and related fields

To advocate within the nephrology community for education and research
relevant to women's health

Annual WIN Luncheon Meeting at ASN 1999

Thanks to members and colleagues for an excellent turnout for the 16th annual WIN Luncheon Meeting at ASN. An estimated 100 people heard Dr. John McKenzie, Nephrologist and Ethicist from the University of Manitoba, address "The Nephrologist as Primary Care Physician." Dr. McKenzie reiterated what we all suspected: there is little scientific literature addressing this issue. He then developed the view that this is a fundamentally ethical issue and from this stance made the case supporting the Nephrologist's role as chief care coordinator.

Following Dr. McKenzie's thoughtful comments, Dr. Susan Bagby presented, on behalf of the WIN Council, two special awards.

Dr. Nancy B. Cummings was honored for her Exceptional Service to WIN as chair of the ASN Luncheon Program Committee since the founding of WIN in 1983. Dr. Cummings has not only arranged for speakers every year, but has sailed through crises that would daunt the faint of heart. On several occasions she has been forced to recruit an alternative speaker on short notice and, on one recent occasion when a speaker was called away by a family emergency, Dr. Cummings salvaged the program by giving the talk herself with only a few hours notice! She has generously tapped her wide circle of nationally-known colleagues to bring outstanding talent to the annual WIN Luncheon.

Dr. Christine K. Abrass was honored for her Exceptional Leadership as President of WIN during 1996-1998. As President, Dr. Abrass created the organizational structure that provides continuity for WIN's committees, pioneered WIN's constructive interactions with the ASN Council, fostered the launching of WIN's Professional Development Seminar, initiated and developed the first NIH Conference addressing renal disease in women, and created the WIN DataBase to enhance women's career opportunities.

Both Dr. Cummings and Dr. Abrass received framed award certificates specially designed for WIN.

Dr. Sandra Levison was acknowledged for her designation as a **1999 "Women's Health Hero"** by American Health magazine, given for her career-long work as a tireless advocate for women in medicine and for the inclusion of women's health issues in the medical curriculum. Dr. Levison is a Founding Member of WIN, a mentor and friend to many, and a source of pride for all. WIN congratulates her on this outstanding honor.

Dr. Bagby conducted the annual WIN Business meeting, including reports by Secretary Dr. Agnes Fogo, Treasurer Dr. Mary Foster, and Mentor Committee Co-Chair Dr. Michelle Josephson.

The 1999 - 2000 WIN Council

The WIN Council would like to hear from you, the membership. Please feel free to contact any council member to discuss issues of importance or concern, to make suggestions for projects that WIN could participate in, or to volunteer your services to the Association.

Susan P. Bagby, MD	President	bagbys@ohsu.edu
Wendy W. Brown, MD	President-Elect	Wendy.Brown@med.va.gov
Christine K. Abrass, MD	Past President	cabrass@u.washington.edu
Agnes Fogo, MD	Secretary	agnes.fogo@mcmail.vanderbilt.edu
Mary H. Foster, MD	Treasurer	mhfoster@duke.edu
Susan B. Conley, MD	Councilor	sueconley@msn.com
Susan K. Fellner, MD	Councilor	sfellner@med.unc.edu
Michelle A. Josephson, MD	Councilor	mjosephs@medicine.bsd.uchicago.edu
Susan E. Mulroney, PhD	Councilor	mulrones@georgetown.edu
Priscilla Kincaid-Smith	Councilor at Large	

WIN Committee Chairs

The WIN committee chairs welcome input from all of you. Please feel free to contact any of them.

ASN WIN Luncheon	Nancy B Cummings, MD
Awards/Nominations	Sharon P. Andreoli, MD
WIN Database	Christine K. Abrass, MD
Fund Raising	Susan P. Bagby, MD and Mary H. Foster, MD
Meeting Arrangements	Wendy W. Brown, MD
Membership Recruitment	Susan B. Conley, MD and Nancy D. Adams, MD
Mentoring	Susan K. Fellner, MD and Michelle A. Josephson, MD
Newsletter	Patricia A. Preisig, PhD
Nephrology Interest Groups	Susan P. Bagby, MD
Professional Development	Catherine O. Stehman-Breen, MD
Program	Susan E. Mulroney, PhD and Kathryn Sandberg, PhD
Public Relations	Judith H. Veis, MD
Women's Health Task Force	Christine K. Abrass, MD and Sandra P. Levison, MD

2nd Annual WIN Meet-A-Mentor Luncheon and Program

Speaker: Dr. Bernice Sandler

Senior Scholar at the National Association for Women in Education, Washington, D.C.

“Strategies for Warming Up the Chilly Climate for Women”

Sunday, October 15th, 12:30 - 1:30 pm

Sutton Place Hotel, Queen Victoria Ballrooms A and B

WIN welcomes all interested mentees and mentors from the research, education, and practice

1999 WIN-NIH Symposium "Women and Renal Disease"

Amazing as it may seem, there had never before been an NIH symposium on renal disease in women. It is now history that the first meeting was initiated by WIN when Dr. Christine Abrass, then WIN President, contacted NIKKD Director Dr. Josie Briggs to discuss such an event. Jointly developed by Dr. Abrass and Dr. Paul Kimmel of NIDDK, the September, 1999 meeting far exceeded all expectations in its scope, the quality of the science presented, the breadth of basic science and clinical fields represented, and the enthusiasm of the participants. Topics ranged from basic science to clinical epidemiology to gender-specific clinical care, and included such subjects as mitochondrial DNA (which is inherited thru the mother), the basic biology of estrogen, sex steroids and angiogenesis, bone disease in women with ESRD, and ESRD as an estrogen deficient state. Attendees participated in a series of workshops designed to develop and prioritize key research questions that need answering in future studies of women's renal health. A common thread in these workshops was inescapable: At present there is little known about women's renal health, so that basic descriptive information is urgently needed in order to move forward. The output from each of the workshops was compiled into a final report, co-edited by Drs. Abrass and Kimmel. Those wishing to obtain a copy of the report can contact Dr. Abrass (cabrass@u.washington.edu).

Don't Miss the *WIN Booth* in the Exhibit Hall at ASN 2000

1. Pick up a WIN membership packet
2. Complete a database questionnaire
3. Sign up to be part of a WIN committee
4. Pick up a WIN newsletter
5. Catch up with old friends
6. Meet new friends, mentors, and scientific collaborators
7. Help at the booth - all volunteers welcome!!! Contact July Veis: jhv1@mhg.edu

Bring a friend, a potential new WIN member, or anyone else you happen to be with.

**We Look Forward To Seeing You
at Booth # 1143.**

Know Someone Who is Not A WIN Member??

If you know someone who is not a WIN member, take the time to introduce them to WIN. Ask them to contact Susan Bagby to get a membership application. Susan will also send them the WIN Database Information Sheet so that they can become part of the WIN database immediately.

Susan can be reached by email bagbys@ohsu.edu, phone (503-220-8262,

Sponsors of Women in Nephrology Educational Projects in 2000

WIN is especially pleased to acknowledge and thank the following sponsors of 2000 WIN Educational Projects.

WIN/ASN Professional Development Seminar October 12, 2000

Amgen
Baxter
Boehringer-Ingelheim
Merck
Pfizer

WIN Luncheon Lecture: Sunday, October 14, 2000 Astra-Zeneca

WIN Meet-a-Mentor (MAM) Lunch/Program Sunday, October 15, 2000

Fujisawa
Roche
Thomas Maren Foundation

Nephrology Interest Groups Initiative Coordinated by WIN, ASN, and RPA

National Level

ASN

Portland, Oregon Area

Amgen
Merck
Pfizer-Pratt

***Thank You Again to All
1999 WIN Event Sponsors***

WIN Acknowledges and Appreciates Your Support

**WIN/NIH Conference
"Women and Renal Disease"
(held September 14-17, 1999)**

ASN
AstraZeneca
Baxter
Bristol-Meyer Squibb
Fresenius Medical Care
Gambro

**WIN - ASN Professional Development Seminar
(held during ASN 1999)**

Amgen
Boehringer-Ingelheim
Fujisawa
Genzyme
Merck

**Annual WIN Luncheon Meeting
(held during ASN 1999)**
AstraZeneca

**WIN Meet-a-Mentor Luncheon 1999
(held during ASN 1999)**

Fujisawa
Roche
The Thomas Maren Foundation

**Mark Your Calendars For The
Annual WIN Luncheon Meeting**

***Saturday, October 14th,
12:30 - 1:30 pm
Room 716A
Toronto Convention Center***

WIN invites all ASN members to attend.

**The WIN Luncheon Meeting is a
Don't-Miss Event!**

We are very pleased that **Dr. Nancy Gary**, President of the Educational Commission for Foreign Medical Graduates will be our speaker this year. Her topic will be **'Professional Development for Women: Strategies and Opportunities.'**

Round-up your colleagues (men and

The 1999 MAM Lunch Was A Success

The development of a mentoring program has been a longstanding priority for WIN. On November 7th, 1999 that goal was realized with the highly successful inauguration of the Meet-A-Mentor (MAM) Program.

The program focuses on mentoring and career paths. Susan Fellner and Michelle Josephson gave an initial overview of mentoring. Then three women, who have chosen distinctive career paths, [Dr. Ulla Kopp (PhD Scientist), Dr. Eda Hochgelerent (private practice), and Dr. Peggy Bia (academic clinician)] discussed issues critical to developing successful and fulfilling work and private lives. Following the formal presentations, there was a lively exchange of ideas and thoughts between the audience and the speakers.

In order to facilitate mentor and mentee interactions, the room was set up with designated career path tables. Potential mentors and mentees could meet and talk to colleagues who shared career goals and interests. The enthusiasm of the nearly 100 attendees exceeded our expectations. The feedback regarding the utility and enjoyment of the program has been uniformly positive, confirming that the luncheon was a wonderful inauguration of the mentoring program.

In addition to the luncheon, WIN has developed a database listing interested mentors and mentees, as well as their contact information. All MAM luncheon participants are included in the list. The database was sent to all MAM luncheon participants. If you were unable to attend the luncheon, but would like a list, let us know.

WIN Program Committee

Please join us Sunday October 15th at ASN 2000 for our second MAM luncheon. We are very excited that Bernice R. Sander, Ed.D., Senior Scholar in Residence at the National Association for Women in Education, will join us to talk about success and survival strategies in professional development.

epidemiologist Dr. David Barker from Southampton, UK as the lead speaker. For NKF 2001, the WIN Symposium will address "Managing Women with ESRD: Challenges across the Reproductive Lifespan." Topics will include gender and renal progression, HRT issues in ESRD, bones and hormones, and the risk of preeclampsia.

We Love to Hear From Each Other and About Each Other!!!

This is your newsletter. If you would like to contribute an article, please do so. If you have exciting news or know of some exciting news about another WIN member, please let us know. Send all information to WIN Program Committee, and in many cases have been incorporated into the final program. At ASN 2000, WIN is pleased to co-sponsor a symposium "Estrogen Modulation of Kidney and Urogenital Function."

Patricia Preisig, PhD
University of Texas Southwestern Medical Center

By this process and through the Committee's year-round hard work, WIN has established a precedent for thoughtful contributions to both NKF and ASN programming, providing expertise on women's health issues, and demonstrating a willingness to step to the plate should the other renal societies need our participation in finalizing program plans. Congratulations to the 2000 WIN Program Committee for outstanding work!

Congratulations WIN Members

Dr. Sharon Anderson

Member of the 2000 ASN Program
Committee

Drs. Chris Abrass and Sharon Moe

Members of the 2001 NKF Program
Committee

Dr. Pat Preisig

New member of the ASN Basic Science
Committee

Do Not Miss!!!

The WIN - ASN Symposium

'Estrogen as a Modulator of Kidney and Urogenital Function'

Sunday, October 15th

1:30 - 3:30 pm

Rm 701A

Metro Toronto Convention Centre

Nephrology Interest Groups Initiative

In 1999, WIN proposed, and the ASN Council approved, the development of five ASN-funded Pilot Centers to form Nephrology Interest Groups to recruit talented young physicians – women and men - into Nephrology. Since then the RPA has also joined as a partner in this effort. WIN's interest in this project stems from the recognition that 50% of interested students and house officers are likely to be women seeking visibly successful role models. Participation of WIN members in this effort provides those role models and also creates a system for initiating mentoring early in the careers of these would-be Nephrologists.

Four (of the 5) ASN-funded Pilot Centers are now active: Portland, OR; Chicago, IL; Washington, DC; and Atlanta, GA. Durham, NC Nephrologists (Duke University) are forming an Interest Group and will participate informally. A Coordinating Committee of WIN, ASN, and RPA representatives (see organizational chart) will support the local groups in planning 4 events yearly, providing customized training experiences with local Nephrologists, and disseminating information on Nephrology Training Programs. Once a resident commits to a renal career, the local Nephrologists can facilitate the application process, provide letters of support, and introduce residents to colleagues at the interviewing sites.

Organizational Chart

Nephrology Interest Groups Coordinating Committee Members

Susan Bagby, MD, Portland, OR Chair (WIN)

Arlene Chapman, MD, Atlanta, GA (WIN)

Susan Bray, MD, Philadelphia, PA (RPA)

Susie Q. Lew, MD, Washington, DC (ASN)

Laura Mulloy, MD, Augusta, GA (ASN)

Pilot Centers and Local Co-Chairs

Atlanta, GA: **Arlene Chapman**, MD; **Stephen O. Pastan**, MD

Chicago, IL: **Tammy Ho**, MD; **Kelly Guglielmi**, MD

Portland, OR: **Hem Deodhar**, MD; **Cynthia Gaboury**, MD

Washington, DC: **Susie Q. Lew**, MD

Durham, NC: **Lynda Szczech**, MD

The Portland Nephrology Interest Group has had 3 events and a tremendous response from both house officers (from 3 Internal Medicine training programs) and local Nephrologists. The first dinner/meeting attracted 15 residents and as many local Nephrology practitioners, provided time for personal interactions, and evoked enthusiastic praise from residents. The second program showcased a panel of 3 Nephrologists from rural, intermediate-sized, and urban practice settings. Unstructured questions from house officers about practice realities and candid discussions provided an evening as informative for Nephrologists as for the residents and students. The third dinner program will feature a talk by Dr. William Bennett, Past President of the ASN, on "Drug Dosing in Sick Patients". City-wide to date, 26 residents have expressed an interest in Nephrology!

Any Nephrology group can initiate a Nephrology Interest Group for Internal Medicine residents in their area. A local Nephrology training program is not required, and the Coordinating Committee can provide ideas, support and information on Nephrology training programs. The group functions and activities can be designed to fit local needs. We encourage groups to designate local Co-Chairs and to include ASN, WIN and RPA members in their efforts. Pharmaceutical houses have been very willing to support dinner events with an educational focus via unrestricted grants.

The Care of Patients with Renal Disease in Kosovo

Together with Mark Adams, Chief of the Abdominal Transplant Service at the Medical College of Wisconsin in Milwaukee, I recently had the opportunity to travel to Kosovo as a consultant to the World Health Organization, to assess the care of renal patients and identify opportunities to reduce costs of dialysis. The healthcare system in Kosovo presents some unusual challenges. For ten years, prior to the June 1999 return of power to Albanian Kosovars following the NATO bombings, Albanian Kosovar health professionals were not allowed to work in hospitals or attend medical or other professional schools. During that period, they established a parallel underground medical system, treating patients and conducting medical education in secret in basements and private homes. Unfortunately, they had no access to current literature and books and, therefore, most medical practice and knowledge is 9 to 10 years out of date. When the Serbs left last June, much of the hospital equipment was disabled or destroyed. All medical books that were not written in the Serbian language had been destroyed. Albanian Kosovars returned to the hospitals, however, many had never worked in a hospital or hadn't for the past ten years. The Chief of the Vascular Surgery Service spent the last ten years working in a dog lab in Austria; the Chief of the Emergency Department was a quality control supervisor for Dow Chemical in Brooklyn. The scene was described as looking like a movie set: they looked like doctors and nurses, they wore stethoscopes and white coats, but they didn't know how to use the limited equipment that was available.

There are only 3 nephrologists in Kosovo, all in Prishtine Hospital Center. When we visited, there were 264 patients on dialysis in five hospital dialysis units. The four units outside of Prishtine are directed by non-nephrologists, some of who have extensive experience with dialysis. The estimated prevalence of ESRD in Kosovo is 155 per million population, although that figure is low because many refugees have not returned home. In comparison, the prevalence of ESRD in European Union in 1995 was 644 per million population. The hemodialysis patient population is generally young, with a mean age of 40 - 45 years. Only one patient performs peritoneal dialysis. There are only 6 patients under the age of 20 years. The nephrologists report that they see no children with nephrotic syndrome, congenital renal anomalies, or urinary tract infections. It is clear that pediatric renal disease is not being recognized or treated. Kosovo does not have a transplant program. Occasionally, children are transplanted abroad through charitable organizations.

Observation of dialysis in Kosovo was a humbling example of doing much with little. Overall, the quality of dialysis care was very good considering the age and poor condition of water treatment and dialysis equipment and the lack of appropriate laboratory tests and pharmaceuticals. Annual mortality is between 10 and 15%. More than 90% of patients have primary arteriovenous fistulae; synthetic grafts are not available. Two or three patients acquired graft material abroad and had them placed locally. Cuffed dialysis catheters are not available. Patients awaiting access surgery are hospitalized in Prishtine for as long as two or three months and dialyzed with temporary catheters. Most dialysis machines are very old and beyond their expected lifetimes; some have been used in excess of 40,000 hours. Non-working machines are cannibalized to fix others, and some of the technicians have shown remarkable ingenuity to keep machines working. Machines in Prizren lack air bubble detectors; there were 10 cases of air emboli in the past year, but no fatalities because they do one-on-one dialysis and know what to do when air enters the system. Erythropoietin is not available; anemia is treated with transfusion. Hepatitis B vaccine is not available and many patients and staff are antigen positive. Calcitriol is available only occasionally. They are unable to measure PTH. Etiology of renal disease is unclear. Renal biopsies are not performed because they don't have biopsy needles. The nephrologists have not been trained to perform biopsies and the only stain that Pathology has available is hematoxylin and eosin.

Lack of equipment is not limited to the dialysis unit. Major vascular surgery is performed without angiography, which is not available. There are, of course, no CT machines or MRIs. One of the operating rooms had an overhead light, but it was not mounted. Sanitary facilities were poor – two of the dialysis unit staff bathrooms were "French latrines," porcelain inserts with central holes and footrests. Most of the bathrooms had no hand washing facilities or only cold water with community cloth towels and no soap. Their most valuable resource is the fierce thirst for knowledge exhibited by their young physicians and nurses.

Shortly after I returned I sat through a committee meeting regarding our hospital's upcoming JACHO visit. It focused on the usual minutiae. What a contrast!

Wendy Brown

WIN SPRING NKF 2000 SYMPOSIUM

The WIN NKF Symposium this year was on the fascinating topic of Syndrome X. Dr. David Barker, Director of the Medical Research Council Environmental Epidemiology Unit at the University of Southampton and a consultant physician, spoke on "The Barker Hypothesis: Epidemiological Evidence for Fetal Origin of Syndrome X." Dr. Barker presented evidence that people with low birth weight or who are thin or stunted at birth have an increased risk of coronary heart disease and associated disorders, including hypertension, diabetes and stroke. His data has led to the theory that these diseases originate through poor nutrition in the womb. Dr. Lori Woods, Associate Professor of Nephrology & Hypertension & Clinical Pharmacology at Oregon Health Sciences Center, next spoke on "Maternal Protein Malnutrition: Does Reduced Renin/Angiotensin II Activity in Utero Mediate Renal Maldevelopment?" Dr. Woods showed that perinatal angiotensin II, acting through angiotensin AT₁ receptors plays an important role in renal development, and in long term control of renal function and arterial pressure, suggesting that physiological conditions that cause suppression of the renin angiotensin system in the developing animal may have long term consequences for renal function and blood pressure. She also demonstrated that surgical removal of 50% of the nephrons during development caused reduced renal function and a salt-sensitive hypertension in adulthood, suggesting that a reduced nephron endowment at birth caused by genetic and/or perinatal environmental factors could contribute to essential hypertension in adulthood. Lastly, Dr. Arlene Chapman, Associate Professor of Medicine at Emory University, spoke on "Syndrome X: Maternal Hemodynamics and the Fetal Environment." Dr. Chapman presented strong evidence for a link between an adverse fetal hemodynamic environment and hypertension later in life. All three speakers made a compelling case for the powerful influence an adverse in utero environment can have on the development of degenerative diseases many decades later.