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1889 Long–Term Renal Function after Abdominal Aortic Aneurysm Repair
Sandeep Singh Bahia and Jorg Lucas De Bruin
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1892 Border Health: State-Level Variation in Predialysis Nephrology Care
Yoshio N. Hall and Jonathan Himmelfarb
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1895 Predicting Risk in Peritoneal Dialysis: Is Membrane Biology Destiny?
Maria Erika Ramirez and Joanne Bargman
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1897 Electronic Health Record Patient Portals in CKD and Hypertension Management: Meaningfully Used?
Mallika L. Mendu and Sushrut S. Waikar
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Original Articles

Acute Kidney Injury
1900 Kinetic eGFR and Novel AKI Biomarkers to Predict Renal Recovery
Antoine Dewitte, Olivier Joannès-Boyau, Carole Sidobre, Catherine Fleureau, Marie-Lise Bats, Philippe Derache, Sébastien Leuillet, Jean Ripoche, Christian Combe, and Alexandre Ouattara

1911 The ABO Histo-Blood Group and AKI in Critically Ill Patients with Trauma or Sepsis

Chronic Kidney Disease
1921 Serum Uric Acid and Risk of CKD in Type 2 Diabetes
Salvatore De Cosmo, Francesca Viazzi, Antonio Pacilli, Carlo Giorda, Antonio Ceriello, Sandro Gentile, Giuseppina Russo, Maria C. Rossi, Antonio Nicolucci, Pietro Guida, Daniel Feig, Richard J. Johnson, Roberto Pontremoli, and the AMD-Annals Study Group

1930 Long-Term Renal Function after Endovascular Aneurysm Repair
Athanasios Saratzis, Michael F. Bath, Seamus Harrison, Robert D. Sayers, Asif Mahmood, Pantelis Sarafidis, and Matthew J. Bown
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Critical Care Nephrology
1937 Renal Outcomes in Critically Ill Patients Receiving Propofol or Midazolam
Tacyano Tavares Leite, Etienne Macedo, Izanio da Silva Martins, Fernanda Macedo de Oliveira Neves, and Alexandre Braga Libório
Epidemiology and Outcomes

1946 Rate of Kidney Function Decline and Risk of Hospitalizations in Stage 3A CKD
Yan Xie, Benjamin Bowe, Hong Xian, Sumitra Balasubramanian, and Ziyad Al-Aly

1956 Urinary Biomarkers and Risk of ESRD in the Atherosclerosis Risk in Communities Study

1964 A Systematic Review and Meta-Analysis of Outcomes of Pregnancy in CKD and CKD Outcomes in Pregnancy
Jing-Jing Zhang, Xin-Xin Ma, Li Hao, Li-Jun Liu, Ji-Cheng Lv, and Hong Zhang

1979 Interstate Variation in Receipt of Nephrologist Care in US Patients Approaching ESRD: Race, Age, and State Characteristics
Guofen Yan, Alfred K. Cheung, Tom Greene, Alison J. Yu, M. Norman Oliver, Wei Yu, Jennie Z. Ma, and Keith C. Norris
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ESRD and Chronic Dialysis

1990 Peritoneal Equilibration Test and Patient Outcomes
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2002 ADAMTS13 Secretion and Residual Activity among Patients with Congenital Thrombotic Thrombocytopenic Purpura with and without Renal Impairment
Erica Rurali, Federica Banterla, Roberta Donadelli, Elena Bresin, Miriam Galbusera, Sara Gastoldi, Flora Peyvandi, Mary Underwood, Giuseppe Remuzzi, and Marina Noris

Health Services Research

2013 Disparities in Electronic Health Record Patient Portal Use in Nephrology Clinics
Manisha Jhamb, Kerri L. Cavanaugh, Aihua Bian, Guanhua Chen, T. Alp Ikizler, Mark L. Unruh, and Khaled Abdel-Kader
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2023 Nephrolithiasis as a Risk Factor for CKD: The Atherosclerosis Risk in Communities Study
Andrew E. Kummer, Morgan Grams, Pamela Lutsey, Yuan Chen, Kunihiko Matsushita, Anna Köttgen, Aaron R. Folsom, and Josep Coresh

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2039 Handling of Drugs, Metabolites, and Uremic Toxins by Kidney Proximal Tubule Drug Transporters
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2050 T Cells: Soldiers and Spies—The Surveillance and Control of Effector T Cells by Regulatory T Cells
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2094 The Ethics of Chronic Dialysis for the Older Patient: Time to Reevaluate the Norms
Bjorg Thorsteinsdottir, Keith M. Swetz, and Robert C. Albright

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On the Cover
What’s the diagnosis? A 36-year-old patient on chronic hemodialysis noted right elbow pain associated with numbness and hypoesthesia of the right forearm and hand. The patient underwent conventional X-ray of the right elbow, which demonstrated large soft-tissue calcifications (cover image). Prior to returning to dialysis, the patient previously had a functioning kidney transplant for 10 years. While on hemodialysis, the patient maintained a calcium-phosphate product of 80-90 mg²/dL² despite maximal dosage of non-calcium-based phosphate binders and a hemodialysis bath calcium concentration reduced to 1 mmol/L for each session (3×4h per week). Review of total-body X-rays detected additional soft-tissue calcifications in both hips and hands. Extravascular calcification in patients maintained on chronic hemodialysis is considered to be a major cardiovascular risk factor. Such calcium deposits within tissues are thought to result from a complex imbalance between calcification inducers and inhibitors. Notably, calcification is more likely to occur in the presence of higher circulating levels of phosphate, calcium, fibroblast growth factor 23 (FGF23) and osteocalcin, and lower levels of matrix-Gla protein, fetuin-A and osteoprotegerin. Very often, soft-tissue calcifications reflect severe bone disorders, including low bone turnover with increased serum calcium and phosphate levels. In the present case, soft-tissue calcifications of the right elbow were surgically removed because of the associated pain, inflammation and nerve compression. The patient rapidly recovered mobility of his hand and the pain progressively resolved. Additional efforts were undertaken to improve the patient’s adherence to low phosphate diet, which slightly improved the calcium-phosphate product to 70 mg²/dL². However, no significant impact on the soft-tissue calcifications in the hips and hands was noted. Daily sessions of home hemodialysis were initiated to further increase phosphorus removal. (Images and text provided by Antoine Bouquegneau, MD, Francois Jouret, MD, PhD, and Pierre Delanaye, MD, PhD, University of Liège Academic Hospital (ULg CHU), Liège, Belgium)