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1090 Adverse Drug Reactions in Patients with CKD
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Glomerular and Tubulointerstitial Diseases

1103 Developments in the Histopathological Classification of ANCA-Associated Glomerulonephritis
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1112 External Validation of the International IgA Nephropathy Prediction Tool
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1121 Effects of Intensive Blood Pressure Control in Patients with and without Albuminuria: Post Hoc Analyses from SPRINT
Alex R. Chang, Holly Kramer, Guo Wei, Robert Boucher, Morgan E. Grans, Dan Berlowitz, Udayan Bhatt, Debbie L. Cohen, Paul Drawz, Henry Punzi, Barry I. Freedman, William Haley, Amret Hawfield, Edward Horwitz, Christopher McLouth, Don Morisky, Vasilios Papademetriou, Michael V. Rocco, Barry Wall, Daniel E. Weiner, Athena Zias, and Srinivasan Beddu, for the SPRINT Research Group
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1129 Comparative Efficacy and Safety of BP-Lowering Pharmacotherapy in Patients Undergoing Maintenance Dialysis: A Network Meta-Analysis of Randomized, Controlled Trials
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1139 Clinical Features of Maintenance Hemodialysis Patients with 2019 Novel Coronavirus-Infected Pneumonia in Wuhan, China
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1146 Apixaban versus No Anticoagulation in Patients Undergoing Long-Term Dialysis with Incident Atrial Fibrillation
Thomas A. Mavrakanas, Katherine Garlo, and David M. Charytan

1155 Efficacy and Safety of Daprodustat Compared with Darbepoetin Alfa in Japanese Hemodialysis Patients with Anemia: A Randomized, Double-Blind, Phase 3 Trial
Tadao Akizawa, Masaomi Nangaku, Taeko Yonekawa, Nobuhiko Okuda, Shinya Kawamatsu, Tomohiro Onoue, Yukihiro Endo, Katsutoshi Hara, and Alexander R. Cobitz

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1166 Racial Differences in Risk Factors for Kidney Stone Formation
Anna L. Zisman, Fredric L. Coe, Andrew J. Cohen, Christopher B. Riedinger, and Elaine M. Worcester

Transplantation

1174 Early Outcomes of Outpatient Management of Kidney Transplant Recipients with Coronavirus Disease 2019
See related editorial on page 1087.

Research Letter

1179 Association of Race and Risk of Graft Loss among Kidney Transplant Recipients in the US Military Health System
Crystal J. Forman, Christina M. Yuan, Rahul M. Jindal, Lawrence Y. Agodoa, Kevin C. Abbott, and Robert Nee
On the Cover

What is the diagnosis?
A 32-year-old male presented for initial evaluation of CKD with a history significant for Fabry disease. Past medical history was notable for irritable bowel syndrome, painful neuropathy of his extremities, and anhidrosis. On examination, blood pressure was 110/74 mmHg; there was no flank tenderness. Serum creatinine was 0.64 mg/dl. Urine dipstick was positive for protein of 100mg/dl but otherwise bland.

Image Description:
A screening renal ultrasound showed multiple anechoic lesions in the renal sinus with no connection to the ureter, which was initially characterized as moderate bilateral hydronephrosis (Left). Magnetic resonance imaging (MRI) with gadolinium was performed to further evaluate the presence of obstruction. This revealed multiple bilateral T2 hyperintense parapelvic cysts without communication with the collecting system (Center). These were non-enhancing cystic lesions along the renal sinuses without evidence of contrast filling on T1 delayed postcontrast imaging (Right). There was no obstructing calculus or hydronephrosis, and the corresponding findings on the ultrasound were attributed to the bilateral renal sinus cysts discovered on MRI.

Teaching Points:
Parapelvic cysts are common in Fabry disease, with an estimated prevalence of 29%–43%, significantly higher than the approximately 1% estimated prevalence in the general population; but they are not specific to this condition. They are often misdiagnosed as hydronephrosis due to the hypoechoic character by ultrasonography and the location in the renal sinus. When asymptomatic hydronephrosis is noted by ultrasonography without identifiable obstructive lesions in patients with Fabry disease, the possibility of parapelvic cysts should be considered.

Disclaimer:
The views expressed herein are those of the authors and do not reflect the official policy of the Departments of Army, Navy, Air Force, Department of Defense, or US Government.

(Images and text provided by Richard Plasse, DO, Megha Joshi, DO, Robert Nee, MD, and Maura Watson, DO, MPH, Nephrology Service, Walter Reed National Military Medical Center, Bethesda, MD, and Department of Medicine, Uniformed Services University, Bethesda, MD, and Nathan Bumbarger, Radiology Service, Walter Reed National Military Medical Center, Bethesda, MD.)