

PRESIDENT'S LETTER

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**Dear Members of the ISPD,**

In writing my second letter to you as your President, I would like to again thank you for the opportunity to serve as your President and interact with our council. To date, it has been a rewarding experience. In my last letter, I stated that my goal was for our society to take advantage of PD's current position in the world of dialysis and expand on our knowledge and our educational efforts, while at the same time, when clinically appropriate, increase the utilization of PD.

**Educational Activities:** Since that Letter, during 2009, the North American, Asian and Latin American Chapters of our society have had successful meetings. New ideas were presented and the science better understood so that the practice of PD continued to advance. We are now actively registering participants for our 13<sup>th</sup> International Congress, scheduled to be held in Mexico City July 23-26, 2010. Dr Ramon Paniagua is the meeting President. He and his scientific committee have formulated an excellent agenda to promote their theme which is "Advancing the Science of PD". Please see [www.ISPD.org](http://www.ISPD.org) for registration details and an up to date agenda. We encourage you to attend this historic meeting – Mexico was the site of the first ISPD congress and most patients with treated ESRD in Mexico have traditionally utilized PD. We anticipate a well attended meeting with further scientific advances, further assimilation of our knowledge of PD and a wonderful cultural experience. Our council and selection committee have also been busy and have awarded the 14<sup>th</sup> ISPD congress to the Malaysian Society of Nephrology. Dr Philip Jeremiah and Dr Zaki Morad will be the local point persons. We also look forward to this meeting in 2012.

**Clinical Activities in PD:** Clinical outcomes on PD remain very favorable. Observational reports that compare relative risk of death for PD versus Center HD continue to suggest that the therapies are very similar in outcomes with an early survival advantage favoring PD for most patients. Since my last letter, PD utilization has continued to grow in Asia. In fact not only do Hong Kong and Singapore have PD first approaches, but due to financial constraints and observational studies it is anticipated that the governments of Thailand and Malaysia may also consider this approach. In Europe PD utilization has remained stable. In the United States, while utilization has been relatively stable, it is anticipated that because of a government mandated change in reimbursement policy starting in 2011 the utilization of home dialysis therapies (PD included) will increase. The payment system will change from an "as used" policy where there is a separate bill for the dialysis and meds, to a "bundled" payment for all dialysis related services. This will remove any unintended financial incentive to offer a therapy that tends to "use" more medications. In general the cost for PD is less than the cost for in-center HD. I feel that as a result of favorable observed clinical outcomes and changes in reimbursement PD utilization in the United States will increase. This change should also promote the use of assisted home PD (such as is occurring in France and Canada) and home HD therapies.

**Society News:** Under the direction of Dr Yong-Lim Kim, our membership remains stable. Under the direction of Dr Peter Blake, our Journal, *Peritoneal Dialysis International*, is well received. The journal has done well in its transition from hard copy only to on online and traditional hard copy format. We now have online publishing which allows members to see important papers before published in hard copy. Its' numerous editorials are very well received and original manuscript submissions remain high.

Our web site is frequently visited and is full of information. Dr Paul Tam has done a wonderful job in keeping it up to date and has supervised the change in its format. There is no lack of questions for our Questions about PD section, which keeps our past President, Wai-Kei Lo very busy. The ISPD guidelines and standards section is a great resource. Under Dr Beth Piraino's guidance, it includes pediatric guidelines, adult guidelines on infections, ultrafiltration, catheters and a new guideline entitled – "Length of time on PD and Encapsulating Peritoneal Sclerosis". Take a look! Our Nominations committee has presented to council the potential new slate of officers and council members. Current ISPD council recommended their approval by our members. This will formally happen during the next ISPD congress in Mexico City. Dr Joanne Bargman has been nominated to become our next President Elect. During that meeting, I will complete my term as President and Dr Simon Davies will assume the role. Please see the web site ([www.ispd.org](http://www.ispd.org)) for other nominee's. Despite the downturn in the global economy our financial situation remains stable. Dr Isaac Teitelbaum remains a steady steward of our society finances. However, income to the society is dependent on financially successful meetings, profit from the journal and membership fees. So, I encourage you to attend meetings, renew your membership and recruit new members.

Thanks to the hard work of the council and committee chairs and members. I look forward to seeing many of you in Mexico City and to the continued success of our society.

John Burkart MD  
President of ISPD