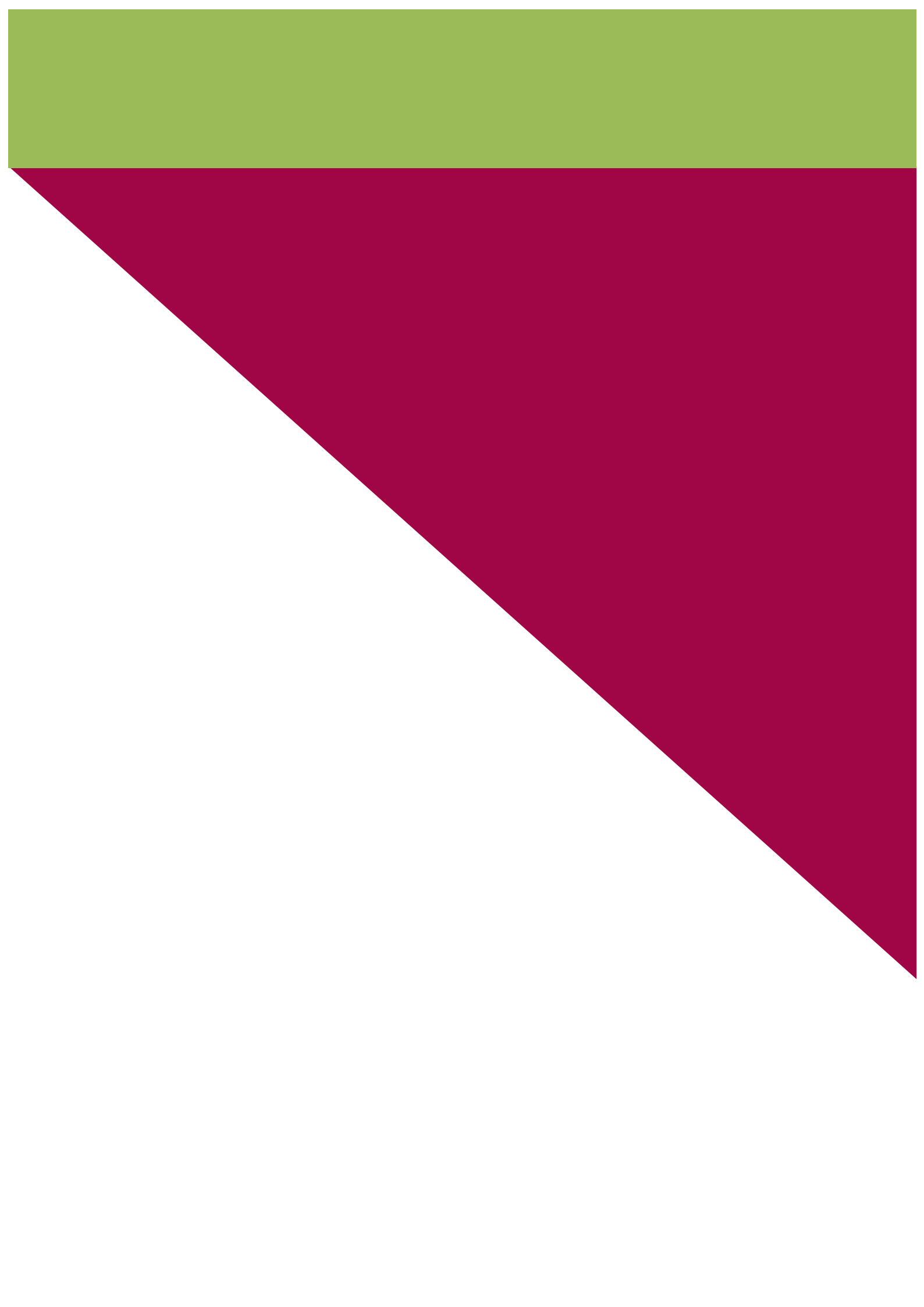


KHA-CARI Guidelines



Annual Report 2014





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Amgen Australia
Australian and New Zealand Society of Nephrology
Shire Australia Pty Ltd

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REPORT FROM THE CHAIR

KHA-CARI Guidelines is now in its 16th year of existence and the first year into the restructured guideline development process, based upon an internationally accepted methodology set by the US Institute of Medicine and GRADE.

The guideline development process was recently restructured in 2014 to increase productivity, maximise efficiency and improve timeliness. We are pleased that the first guidelines using these procedures are currently under development and also include active consumer engagement, to help define relevant topic and outcome selection for the guidelines. The new guideline development process can be found in the KHA-CARI Manual of Operations on the KHA-CARI website (www.cari.org.au). The KHA-CARI website has also been updated to enhance guideline dissemination, support for writers and consumer engagement. The new website was re-launched in early 2014 and within the year has had around 14,000 unique visitors.

KHA-CARI aims to set up a formal collaborative international process for renal guideline development. In 2014, renal guideline organisations shared work plans and a Memorandum of Understanding is currently under development. This collaboration will aim to build upon the work of other renal guideline organisations and leverage their efforts for the benefit of patients in our region. As part of the cooperative approach to international guideline development, KHA-CARI will continue to review the KDIGO guidelines as they are published and assess whether an adaptation or commentary is the best means of building upon their work.

It has been a very busy and productive year, with three guideline summaries, one adapted guideline summary and two commentaries published. The guideline summaries and commentaries were published in the journal *Nephrology*. The complete guidelines are available on the KHA-CARI website (www.cari.org.au). The new guidelines on 'Autosomal Dominant Polycystic Kidney Disease' and 'Screening and Management of Infectious Diseases in Dialysis Units' commenced in 2014 and remain on track for completion in 2015.

Publications during 2014 include:

New Guidelines:

- Diagnosis and Treatment of Urinary Tract Infection in Children (Convenor: Steven McTaggart) – Published
- Cardiovascular Disease (Convenor: Helen Pilmore) – Published

Updates to existing Guidelines:

- Peritonitis Treatment & Prophylaxis (Convenor: Amanda Walker) – Published

Adaptations and commentaries on KDIGO Guidelines:

- Acute Kidney Injury – adaptation (Convenor: Robyn Langham) – Published
- Blood Pressure Management in CKD – commentary (Writer: Matthew Roberts) – Published
- Lipid Management in Chronic Kidney Disease – commentary (Writers: Suetonia Palmer, Giovanni Strippoli, Jonathan Craig) – Published

KHA-CARI has continued to work in the area of implementation research. The current project is focussed on the prevention of peritoneal dialysis catheter-related infection in PD patients. The implementation phase finished in December 2014. The participating units will have a post-implementation meeting in 2015 which will be an opportunity to evaluate the project, give feedback and review data from the 12-month implementation period. Results for the implementation phase will be analysed and sent for publication in 2015.

KHA-CARI Guidelines is greatly appreciative of the significant support it currently receives from Amgen, Shire and the ANZSN, without which KHA-CARI Guidelines could not continue.

The vision of KHA-CARI is to promote best practice and outcomes in patients with kidney disease, through the development, dissemination and implementation of high quality clinical practice guidelines that are based on the best available evidence. Without the contribution of various stakeholders this would not be possible. The voluntary contribution of many nephrologists, nurses and allied health staff underpins the whole process and is recognised and appreciated. I would also like to thank the KHA-CARI staff for their hard work in

supporting the many writers in the guideline groups, and the Steering Committee in helping to direct and guide the work of KHA-CARI Guidelines.

A handwritten signature in black ink, appearing to read 'M Gallagher', with a large, stylized initial 'M'.

Martin Gallagher

Chair

KHA-CARI Guidelines Steering Committee

GUIDELINE ACTIVITIES

The KHA-CARI Guidelines are divided into three disease stages: Chronic Kidney Disease, Dialysis, and Transplantation. A complete listing of guidelines and subtopics and their current status can be found under the Guidelines section on the KHA-CARI website www.cari.org.au

Summary of KHA-CARI Guideline topics being developed and published in 2014

Guidelines	No. of subtopics	In development	Published
Chronic Kidney Disease			
Autosomal Dominant Polycystic Kidney Disease	12	✓	
Cardiovascular Disease	4		✓
Diagnosis and Treatment of Urinary Tract Infection in Children	5		✓
Dialysis			
Peritonitis Treatment and Prophylaxis	10		✓
Screening and Management of Infectious Diseases in Dialysis Units	4	✓	
Transplantation			
No guidelines in development			
Adaptation of KDIGO Guidelines			
Acute Kidney Injury	6		✓
Commentary on KDIGO Guidelines			
Blood Pressure Management in Chronic Kidney Disease	n/a		✓
Lipid Management in Chronic Kidney Disease	n/a		✓

Chronic Kidney Disease

Autosomal Dominant Polycystic Kidney Disease

The convenors of this guideline group are A/Prof Gopala Rangan and Prof Judith Savige and its guideline group members include Dr Michel Tchan, Dr Chirag Patel, A/Prof Allison Tong, Dr Andrew Mallett, Prof Stephen Alexander, Dr Vincent Lee, Dr Jun Mai, Dr Katrina Campbell, Ms Pamela Lopez-Vargas, Dr Mark Dexter, Dr Manish Patel, and Dr Philip Vladica.

The first draft of the guideline has been completed and will be presented at the DNT meeting in Launceston in early March 2015.

The following subtopics are being written:

1. Diagnosis: imaging
2. Diagnosis: genetic testing
3. Diagnosis: genetic counselling
4. Clinical screening
5. Management: imaging
6. Management: diet and lifestyle
7. Management: pharmacological
8. Management: psychosocial care
9. Renal complications: end-stage kidney disease
10. Renal complications: stones
11. Extra-renal complications: chronic pain
12. Extra-renal complications: polycystic liver disease

Cardiovascular Disease

The convenor of this guideline group is A/Prof Helen Pilmore. The guideline group members include Dr Sharan Dogra, Dr Hiddo Lambers Heerspink, Dr Toshiharu Ninomiya, Dr Rachel Huxley, Prof Rob Walker, Dr Matthew Roberts and Prof Vlado Perkovic.

The guideline was completed and accepted for publication in 2013, and was published in the January 2014 issue of *Nephrology*.

The following subtopics are covered:

1. Cardiovascular disease: revascularisation
2. Medical management of coronary artery disease
3. Cardiovascular effects of blood pressure lowering in patients with chronic kidney disease
4. Heart failure

Diagnosis and Treatment of Urinary Tract Infection in Children

The convenor of this guideline group is Dr Steven McTaggart, and its guideline group members include Dr Joshua Kausman, Dr Margie Danchin, Dr Peter Trnka, Dr Michael Ditchfield, Dr Sean Kennedy, Dr Ian Hewitt, and Dr Gabrielle Williams.

This guideline summary has been accepted for publication in *Nephrology* and published on their website in October 2014; the print publication will take place early 2015.

The following subtopics are included:

1. Diagnosis of UTI
2. Acute management of UTI
3. Radiological investigation following UTI
4. Management and investigation of recurrent UTI/VUR

Transplantation

No guidelines in development.

Dialysis

Peritonitis Treatment and Prophylaxis

The convenor for this group is Dr Amanda Walker and its guideline group members include A/Prof Kym Bannister, A/Prof Charles George, A/Prof David Mudge, Dr Maha Yehia, Dr Maureen Lonergan and A/Prof Josephine Chow.

The guideline summary was accepted for publication in *Nephrology* in August 2013 and was published in the February Issue, 2014.

The following subtopics are included:

1. The influence of peritoneal dialysis systems and solutions on the incidence of peritonitis and catheter-related infections
2. Management of PD-associated peritonitis in adults and children
3. Catheter removal, adjunct therapies and timing of reinsertion of PD catheter after peritonitis
4. Type of PD catheter
5. Technique of insertion of PD catheter
6. Prophylactic antibiotics for insertion of PD catheters
7. Timing of commencement of peritoneal dialysis following catheter insertion
8. Treatment of PD-associated fungal peritonitis
9. PD catheter-related infection: exit site and tunnel
10. Prophylaxis for exit site/tunnel infections using mupirocin.

Screening and Management of Infectious Diseases in Dialysis Units

The convenors for this group are A/Prof Meg Jardine and A/Prof Eugene Athan with guideline group members being Dr Carolyn van Eps, Dr Robert Commons, A/Prof Rhonda Stuart, Dr Nicky Gilroy, Belinda Henderson, Dr Janak de Zoysa and Julianne Greene.

The following subtopics are being written:

1. Blood-borne viruses.

2. Multiply resistant organism screening.
3. Transmission-based precautions: treatment and isolation.
4. Environmental controls: cleaning and disinfection.

Adaptation of KDIGO Guidelines

Adaptation of the KDIGO Guideline for Acute Kidney Injury

The convenor of the guideline group is A/Prof Robyn Langham and the guideline group members include Dr Vince D'Intini, Prof Zoltan Endre, A/Prof Martin Gallagher, Dr Bernadette Hickey, Dr Richard Phoon, Prof Rinaldo Bellomo, Dr Shay McGuinness, Ms Karen Salomon and Ms Julie Woods.

The guideline group was formed in 2012 to adapt the KDIGO guideline for Acute Kidney Injury which was published in March 2012. The adaptation process includes an update of the literature search, review of the consistency of the recommendations with the available evidence, applicability of the recommendations to practice in Australia and New Zealand and preparation of the adapted guideline document. The adapted guideline summary was published in the *Nephrology* May Issue, 2014.

The following KDIGO sections were adapted:

- Section 2: Acute kidney injury definition
- Section 3: Prevention of acute kidney injury
- Section 3: Treatment of acute kidney injury
- Section 4: Contrast-induced acute kidney injury
- Section 5: Dialysis interventions for treatment of acute kidney injury
- Section 6: New non-dialytic treatments for acute kidney injury

Commentary on KDIGO Guidelines

We aim for commentaries to be completed and ready for publication within six months of publication of the KDIGO guideline. The commentary writers are appointed by the KHA-CARI Steering Committee and the format of an editorial is followed. Draft commentaries are reviewed by the Steering Committee and edited by the KHA-CARI Office prior to publication in the journal *Nephrology*.

Commentary on the KDIGO Guideline for Blood Pressure Management in CKD

The writer of this commentary is Dr Matthew Roberts.

The KDIGO guideline for Blood Pressure Management in Chronic Kidney Disease was published in December 2012. The commentary was published in the *Nephrology* January issue, 2014.

Commentary on the KDIGO Guideline for Lipid Management in CKD

The writers of this commentary are Dr Suetonia Palmer, Dr Giovanni Strippoli, and Prof Jonathan Craig.

The KDIGO guideline for Lipid Management in Chronic Kidney Disease was published in November 2013. The commentary was published in the *Nephrology* November issue, 2014.

IMPLEMENTATION OF GUIDELINES

Peritoneal Dialysis Implementation Project: Prevention of Infection in Incident PD Patients

The Peritoneal Dialysis (PD) implementation project is focussed on the implementation of KHA-CARI and ISPD guidelines regarding the prophylactic use of antibiotics and antifungals in PD patients. Essentially, these are: use of prophylactic antibiotics at insertion of PD catheter; use of prophylactic antibiotics at the exit site or nasally; and use of antifungal prophylaxis whenever a PD patient is given a course of antibiotics. The first phase of the project has been written up and sent for publication.

The implementation phase finished in mid-December 2014. The units will have a face to face meeting with the project's steering committee in May 2015 so that they can report back on any issues they have encountered with using the tools, discuss any changes made, or barriers to change encountered at their unit during this active phase and suggest improvements applicable to future implementation programs. The data from the implementation period will be compared with the data obtained at baseline. The results will be summarised in scientific papers for presentation at local and international scientific meetings and submitted to relevant journals.

The Steering Committee for this project consists of A/Prof David Mudge (Convenor), Assoc Prof Martin Gallagher, Prof Jonathan Craig, Dr Dwarakanathan Ranganathan, Dr Wai Hon Lim, Dr Walaa Saweirs, and Dr Geoffrey Playford. Denise Campbell is the Project Officer responsible for the day-to-day running of the project.

DISSEMINATION STRATEGIES

Dissemination and promotion of the KHA-CARI guidelines continued to be a prime focus during 2014. Communications to all members of the ANZSN, TSANZ and the RSA are an integral part of this process.

A new KHA-CARI website was launched in 2014 www.cari.org.au. The website incorporates a range of tools to enhance dissemination of guideline content, promote awareness of the KHA-CARI Guidelines and to encourage feedback and involvement. The website features current guidelines and archives older guidelines to help eliminate confusion http://cari.org.au/archived_guidelines.html. KHA-CARI can also now be found on twitter @KHACARI, twitter can be used as an effective medium to engage with health care professionals, patients and caregivers.

KHA-CARI Guidelines had materials available at the Kidney Health Australia exhibition stand at the ANZSN Annual Scientific Meeting in Melbourne in August. Many members visited the stand and were given the KHA-CARI guidelines USB memory card containing all of the KHA-CARI published and accepted guidelines to date, as well as the KHA publication on Chronic Kidney Disease Management in General Practice (2nd edition, 2012). KHA-CARI staff developed and presented promotional material on guideline development, expressions of interest, and new guideline proposals. Visitors to the stand were encouraged to sign up to participate in guideline development or in being peer reviewers.

CONSUMER ENGAGEMENT

As a part of the 'Autosomal Dominant Polycystic Kidney Disease' guideline development, a consumer engagement workshop was held on the 29th August 2014 at the Mantra Hotel in Parramatta. The workshop was attended by 15 patients and three caregivers. Participants provided feedback on the scope of the guideline and on topic selection. The inclusion of consumers in the guideline development process helps to ensure that the guidelines address clinical topics that are relevant and important to the professional community as well as to patients and caregivers.



INTERNATIONAL CHRONIC KIDNEY DISEASE GUIDELINES

Currently, there is a formal lack of collaboration among renal guideline organisations, resulting in guidelines using varying methodologies with gaps in guidance in important clinical areas. KHA-CARI in 2014 has commenced work on formalising an international collaboration, with the aim of providing a solution to the challenge of producing and updating regional and local guidelines.

In 2014, KHA-CARI contacted various renal guideline organisations (KDOQI, CSN, ERBP, UK-RA, KDIGO, SLANH, and NICE) regarding setting up a formal collaborative international process for the development of renal guidelines. This process would include active, parallel consumer involvement, a focus on research translation and adhere to Institute of Medicine standards, particularly regarding conflict of interest. Currently, a Memorandum of Understanding regarding this cooperative guideline development process is being developed.

KHA-CARI EXTERNAL REVIEW

In 2014, an independent external review of KHA-CARI Guidelines was commissioned by the two funding bodies - Kidney Health Australia and the Australian and New Zealand Society of Nephrology. The independent review will be conducted by Prof Carol Pollock and Ms Catherine Marshall with a deadline for submission of the report of 31st March 2015. The review will aim to establish an overview of the standing of KHA-CARI Guidelines nationally by assessing acceptance among health care professionals, publications and their impact on governmental and non-governmental sectors; and the standing of KHA-CARI Guidelines internationally.

PUBLICATIONS

1. Langham, R.G, Bellomo, R, D'Intini, V, Endre, Z, Hickey, B.B, McGuinness, S, Salamon, K, Woods, J, and Gallagher, M.P. KHA-CARI Guideline: KHA-CARI adaptation of the KDIGO Clinical Practice Guideline for Acute Kidney Injury, 2014. 19(5): p. 261-265.
2. McTaggart, S, Danchin, D, Ditchfield, M, Hewitt, I, Kausman, J, Kennedy, S, Trnka, P, and Williams, G. KHA-CARI guideline: Diagnosis and Treatment of Urinary Tract Infection in Children. Nephrology, accepted October 2014. [Note published in February 2015, 20(2): p. 55-60]
3. Pilmore, H, Dogra, G, Roberts, M, Lambers Heerspink, H.J, Ninomiya, T, Huxley R and Perkovic V. Cardiovascular Disease in Patients with Chronic Kidney Disease. Nephrology, 2014. 19(1): p. 3-10.
4. Palmer, S.C. Strippoli, G.F.M. and Craig, J.C. KHA-CARI commentary on the KDIGO Clinical Practice Guideline for Lipid Management in Chronic Kidney Disease. Nephrology, 2014. 19(11): p. 663-666.
5. Roberts, M. Commentary on the KDIGO Clinical Practice Guideline for the Management of Blood Pressure in Chronic Kidney Disease. Nephrology, 2014. 19(1): p. 53-55.
6. Walker, A., Bannister, K, George, C, Mudge, D, Yehia, M, Lonergan M and Chow, J. KHA-CARI Guideline: Peritonitis Treatment and Prophylaxis. Nephrology, 2014. 19(2): p. 69-71.

MEETINGS AND CONFERENCES

50th Annual Scientific Meeting — Australian and New Zealand Society of Nephrology, Melbourne, Australia

Martin Howell, Denise Campbell, Allison Tong and David Tunnicliffe attended the 50th Annual Scientific Meeting of the ANZSN in Melbourne in August.

All members had oral and some poster presentations. Allison presented her work on kidney transplantation and chronic kidney disease; Martin presented his work on quality of life and immunosuppressants in kidney transplantation; Denise presented her work on current practice re antimicrobial prophylaxis in peritoneal dialysis patients and David presented his work on the lupus nephritis clinical practice guidelines.

The following are the abstract titles for the individual presenters:

059. PATIENT AND CAREGIVER PERSPECTIVES ON END-OF-LIFE CARE IN CHRONIC KIDNEY DISEASE: THEMATIC SYNTHESIS OF QUALITATIVE STUDIES. A Tong, KL Cheung, S Sukumaran Nair, M Kurella Tamura, JC Craig, WC Winklemayer.

060. BELIEFS AND EXPERIENCES OF PREGNANCY IN WOMEN WITH CHRONIC KIDNEY DISEASE: SYSTEMATIC REVIEW OF QUALITATIVE STUDIES. A Tong, S Jesudason, JC Craig, WC Winkelmayer.

078. DIAGNOSIS, MONITORING AND TREATMENT OF LUPUS NEPHRITIS: SYSTEMATIC REVIEW OF CLINICAL PRACTICE GUIDELINES. DJ Tunnicliffe, S Kim, D Singh-Grewal, RKS Phoon, JC Craig, A Tong.

094. ASSESSMENT OF CURRENT PRACTICE AND BARRIERS TO ANTIMICROBIAL PROPHYLAXIS IN PERITONEAL DIALYSIS PATIENTS. DJ Campbell, F Brown, J Craig, M Gallagher, DW Johnson, G Kirkland, SK Kumar, WH Lim, D Ranganathan, W Saweirs, K Sud, ND Toussaint, RG Walker, M Yehia, DW Mudge.

124. ADVERSE EVENTS OF MAINTENANCE IMMUNOSUPPRESSION FOLLOWING KIDNEY TRANSPLANTATION REPORTED IN RANDOMISED CONTROLLED TRIALS: A SYSTEMATIC REVIEW. M Howell, R Yeo, A Tong, JC Craig, K Howard, G Wong.

132. RESEARCH PRIORITIES IN CHRONIC KIDNEY DISEASE: A PRIORITY SETTING PARTNERSHIP. A Tong, S Crowe, S Chando, A Cass, SJ Chadban, JR Chapman, M Gallagher, J Gillis, C Hawley, S Hill, K Howard, DW Johnson, P Kerr, T Mathew, A McKenzie, D Parker, K Polkinghorne, V Perkovic, C Pollock, GFM Strippoli, P Tugwell, RG Walker, AC Webster, A Wilson, JC Craig for the Ceport Collaboration.

258. THE PREFERENCES AND PERSPECTIVES OF NEPHROLOGISTS ON PATIENTS' ACCESS TO KIDNEY TRANSPLANTATION: A SYSTEMATIC REVIEW. A Tong, CS Hanson, JR Chapman, F Halleck, K Budde, C Papachristou, JC Craig.

The Transplantation Society of Australia and New Zealand — 2014 Annual Scientific Meeting, Canberra, Australia

Martin Howell and Allison Tong attended the TSANZ Annual Scientific Meeting in Canberra in June.

Martin presented his work on reporting of adverse events in clinical trials of maintenance immunosuppression in kidney transplantation.

Allison presented numerous research projects relating to: community preferences for organ allocation; organ donation and living kidney donor assessment.

American Society of Nephrology — Kidney Week, 2014, Philadelphia, USA

Allison Tong and David Tunnicliffe attended the ASN Kidney Week meeting held in November in Philadelphia, USA.

Allison presented her work on research priorities and patients with CKD perspectives on pregnancy. David presented his work on lupus nephritis.

WEBSITE STATISTICS

KHA-CARI Guidelines Website

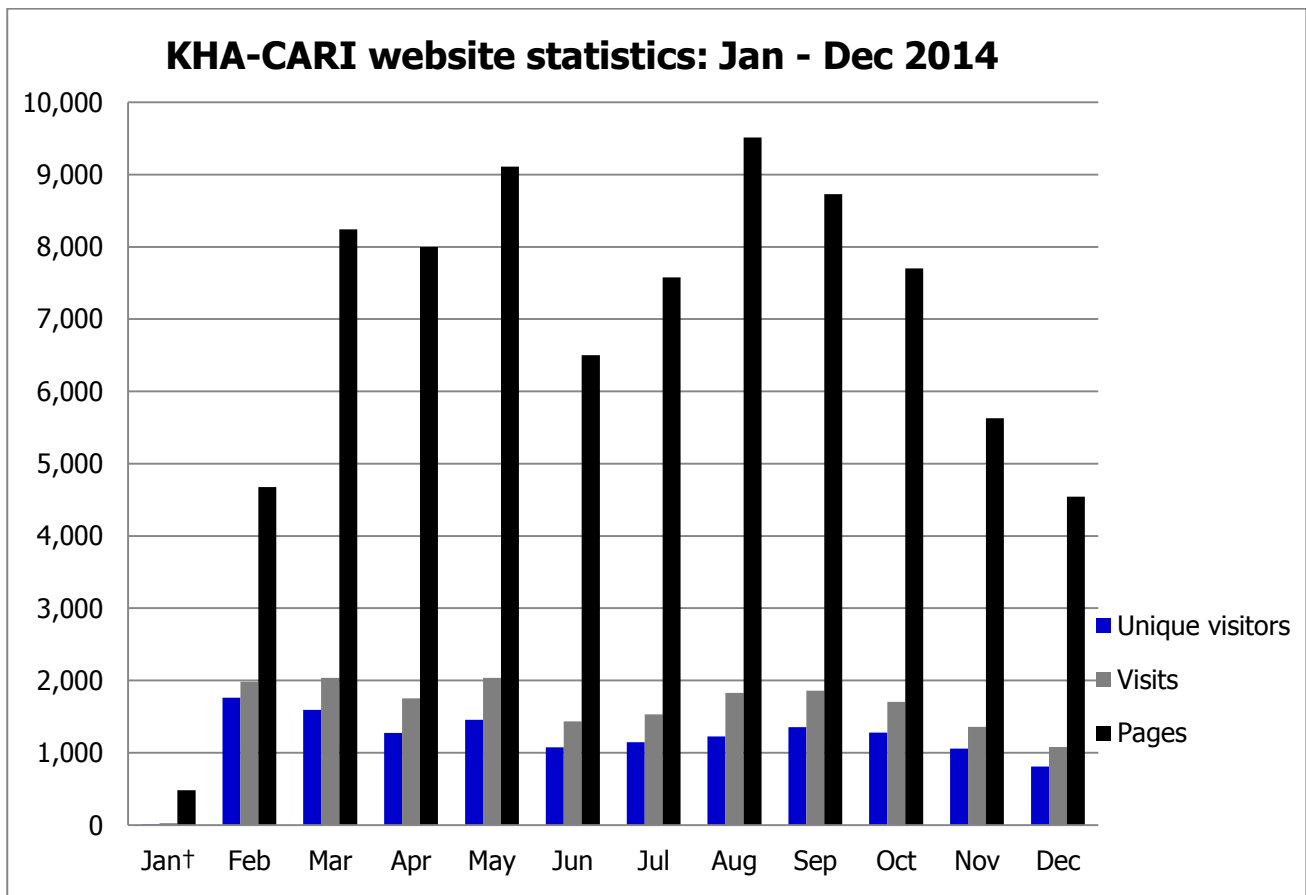
Definitions:

Unique visitors: a person or computer (host) who has made at least 1 hit on 1 page on your website within a specified period of time. Unique visitors are counted only once no matter how many times they visit the site during this period. Visitors are tracked by IP address, so if multiple users are accessing the site from the same IP address, they will be counted as a single unique visitor.

Visits: represents the number of visits made by all visitors. All of the pages accessed within a single session, are included in the site visit. Therefore there will be multiple pages per visit and multiple visits per unique visitor.

Pages: represents the number of pages viewed by visitors. Pages are usually HTML, PHP or ASP files only.

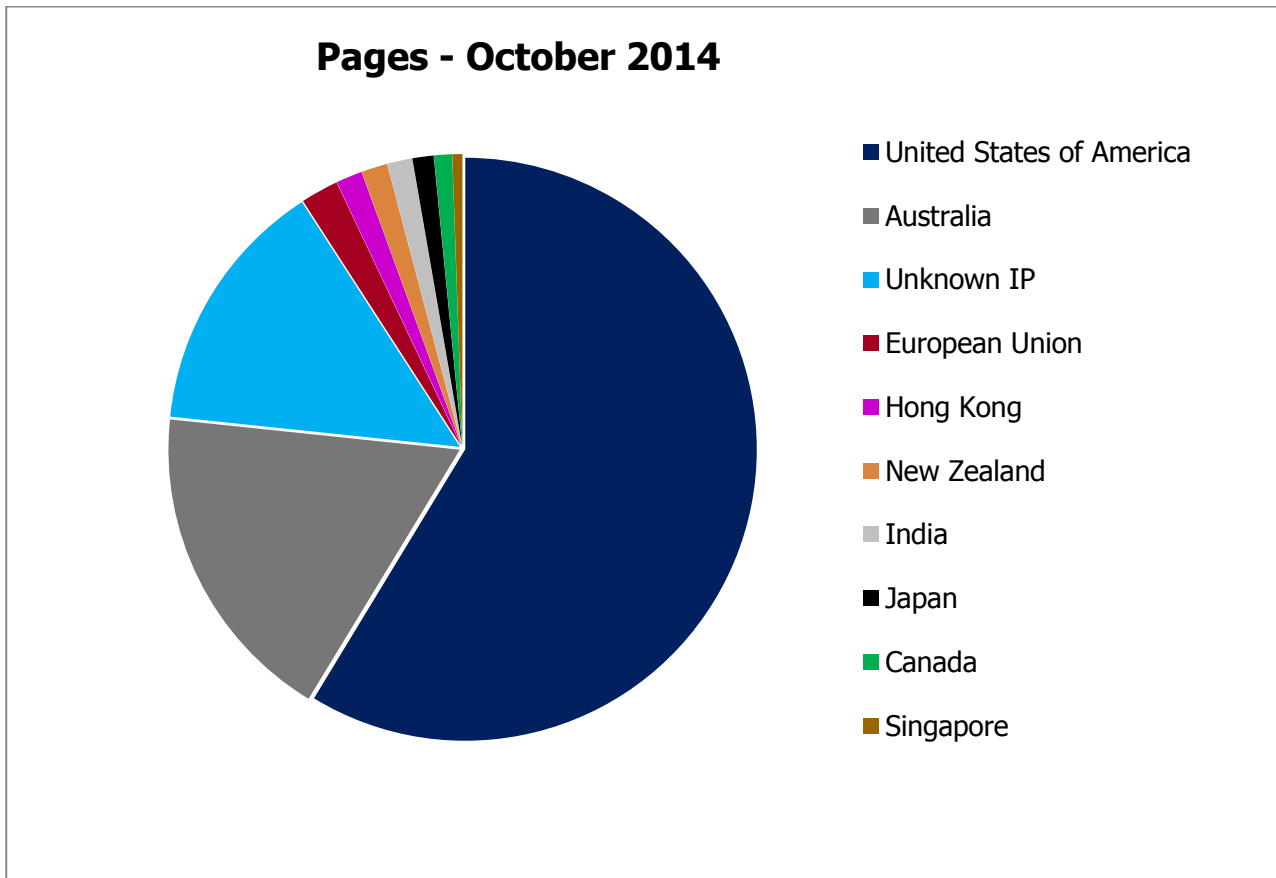
The graph below shows the number of unique visitors, visits, and pages viewed by month for the year 2014. The highest number of site visits was recorded in May and March with 2038 visits each.



* Statistics reported from Google analytics

† Low visit numbers for this month

The figure below shows the top 10 countries which accessed the KHA-CARI website during October, a sample month for the year 2014.



* Statistics reported from Jawstats

The table below shows the top 20 KHA-CARI articles accessed via the *Nephrology* website in 2014.

KHA-CARI Guideline Title	Year published	Number of full text downloads
Peritonitis treatment and prophylaxis (Summary)	2014	836
KHA-CARI adaptation of KDIGO clinical practice guideline for acute kidney injury (Summary)	2014	771
Vascular access: Central venous catheters, arteriovenous fistulae and arteriovenous grafts (Summary)	2013	431
Use of iron in chronic kidney disease patients (Summary)	2013	415
Chronic kidney disease: Prevention of progression of kidney disease: Smoking	2004	325
Prevention and management of chronic kidney disease in type 2 diabetes (Summary)	2010	290
Recipient assessment for transplantation (Summary)	2013	288
Acceptance onto dialysis: Diabetes	2010	226
Dialysis adequacy (haemodialysis): Dialysis membranes (Summary)	2013	218
Chronic kidney disease: Prevention of progression of kidney disease: Acidosis	2004	204
Early chronic kidney disease: Detection, prevention and management (Summary)	2013	201
Acceptance onto dialysis: Ethical considerations	2010	199
Biochemical and haematological targets: Haemoglobin (Summary)	2011	194
Acceptance onto dialysis: Peritoneal dialysis versus haemodialysis (adult)	2010	179
KHA-CARI adaptation of KDIGO clinical practice guideline for care of kidney transplant recipients (Summary)	2012	166
Peritonitis treatment and prophylaxis: The influence of peritoneal dialysis systems and solutions on the incidence of peritonitis and catheter-related infections	2004	166
Assessment of kidney function in type 2 diabetes	2010	148
Care of kidney transplant recipients: Protein requirement in adult kidney transplant recipients	2007	133
Peritonitis treatment and prophylaxis: Peritoneal dialysis catheter-related infection: exit site and tunnel infections using mupirocin	2004	125
Chronic kidney disease: Urine protein as diagnostic test: Evaluation of proteinuria in children	2004	122

FINANCES AND FUNDING

The following is a summary of the income and expenditure associated with KHA-CARI Guidelines for the 2014 calendar year.

Financial Activities: 1 January to 31 December 2014

TOTAL INCOME	\$ 250,000
TOTAL EXPENDITURE	\$ 250,000
Salaries (including 18% oncost)	\$ 225,700
Goods & Services	\$ 5100
Guideline Implementation – PD Project	\$ 9000
Guideline Dissemination	\$ 800
Guideline Writer Training Workshop	\$ 5000
Guideline Publication	nil
Teleconferences – Steering Committee & Guideline Groups	\$ 2400
Face to Face meetings – Steering Committee & Guideline Groups	\$ 2000
KDIGO Meetings	nil
BALANCE OF FUNDS	\$ nil

CONTRIBUTORS TO KHA-CARI

KHA-CARI Guidelines Steering Committee

Martin Gallagher, Chair, KHA-CARI Steering Committee, University of Sydney, Concord Hospital, Concord, NSW

Tim Mathew, University of Adelaide, Medical Director, Kidney Health Australia, SA

Jonathan Craig, University of Sydney, Centre for Kidney Research, Sydney Children's Hospital Network (Westmead), Westmead, NSW

Neil Boudville, University of Western Australia, Sir Charles Gairdner Hospital, Nedlands, WA

Allan Collins, University of Minnesota, Director, Chronic Disease Research Group, Minneapolis, USA

Deirdre Fetherstonhaugh, La Trobe University, Australian Centre for Evidence Based Aged Care, Bundoora, VIC

Balaji Hiremagalur, Griffith University, Consultant nephrologist, Gold Coast Hospital, Southport, QLD

Kevan Polkinghorne, Monash University, Monash Medical Centre, Clayton, VIC

David Mudge, University of Queensland, Princess Alexandra Hospital, Woolloongabba, QLD

Suetonia Palmer, University of Otago, Christchurch, New Zealand

Denise Campbell, Centre for Kidney Research, Sydney Children's Hospital Network (Westmead), Westmead, NSW

Luke Toy, Government Relations Officer for Kidney Health Australia, Canberra, ACT

Nigel Toussaint, University of Melbourne, Royal Melbourne Hospital, Parkville, VIC

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Research Officer

Allison Tong
Research Fellow

David Tunnicliffe
Research Officer

Guideline Group Members

Chronic Kidney Disease	
<p>Autosomal Dominant Polycystic Kidney Disease</p> <p>A/Prof Gopala Rangan (Convenor) Prof Judith Savige (Convenor) Dr Michel Tchan Dr Chirag Patel A/Prof Allison Tong Dr Andrew Mallett Prof Stephen Alexander Dr Vincent Lee Dr Jun Mai Dr Katrina Campbell Ms Pamela Lopez-Vargas Dr Mark Dexter Dr Manish Patel Dr Philip Vladica</p>	<p>Cardiovascular Disease</p> <p>A/Prof Helen Pilmore (Convenor) Dr Sharan Dogra Dr Hiddo Lambers Heerspink Dr Toshiharu Ninomiya Dr Rachel Huxley Prof Rob Walker Dr Matthew Roberts Prof Vlado Perkovic</p>
<p>Diagnosis and Treatment of UTI in Children</p> <p>Assoc Prof Steve McTaggart (Convenor) Dr Ian Hewitt Dr Sean Kennedy Dr Gabrielle Williams Dr Joshua Kausman Dr Michael Ditchfield Dr Peter Trnka</p>	

Dr Margie Danchin	
Dialysis	
Peritonitis Treatment and Prophylaxis Dr Amanda Walker (Convenor) Assoc Prof Kym Bannister Assoc Prof Charles George Assoc Prof Josephine Chow Dr Maureen Lonergan Dr Maha Yehia Assoc Prof David Mudge	Screening and Management of Infectious Diseases in Dialysis Units Assoc Prof Meg Jardine (Convenor) Assoc Prof Eugene Athan (Convenor) Dr Carolyn van Eps Dr Robert Commons Assoc Prof Rhonda Stuart Dr Nicky Gilroy Julianne Greene Belinda Henderson Dr Janak de Zoysa
Adapted Guideline	
Adaptation of the KDIGO guideline on Acute Kidney Injury Assoc Prof Robyn Langham (Convenor) Dr Vince D'Intini Prof Zoltan Endre Assoc Prof Martin Gallagher Dr Bernadette Hickey Dr Richard Phoon Prof Rinaldo Bellomo Dr Shay McGuinness Ms Karen Salomon Ms Julie Woods	
Commentaries	
Commentary on the KDIGO guideline on Blood Pressure Management in Chronic Kidney Disease Dr Matthew Roberts	Commentary on the KDIGO guideline on Lipid Management in Chronic Kidney Disease Dr Suetonia Palmer Dr Giovanni Strippoli Prof Jonathan Craig





