53rd Congress ERA-EDTA
Vienna, Austria
MAY 21st-24th, 2016

Held jointly with
Österreichische Gesellschaft
für Nephrologie

Main Announcement
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www.niere-hochdruck.at
Dear Colleagues and Friends;

It is a great pleasure and honour for us to invite you to Vienna to attend the 53rd ERA-EDTA Congress in 2016, which will be held in cooperation with the Austrian Society of Nephrology. In addition many other societies with similar interests will join us as well. In line with a long standing tradition the scientific programme committee, this time chaired by Prof. Danilo Fliser from Homburg/Saar (Germany), is working hard to make this event again a memorable one by complementing up to date research sessions with diverse educational symposia. The Austria Center Vienna, the congress venue, can be reached conveniently from the historic city center (Stephansplatz) within 7 minutes by underground transportation. It is located within a few minutes’ walk from the river Danube and the Donaupark, a popular leisure area, and it has the capacity to host 20,000 delegates. It offers 24 fully equipped lecture rooms, 180 meeting rooms and 22,000 sqm of exhibition space.

Vienna is a modern city in the heart of Europe, which nonetheless was able to preserve its historic charm. Located near the city center one of the most famous buildings is the Vienna Secession built by Joseph Maria Olbrich, the dome of which can be seen on the front page of this announcement. The Vienna Secession was formed in 1897 by a group of artists (among them Gustav Klimt, Kolomann Moser and Josef Hoffmann), who had resigned from the Association of Austrian Artists because of the prevailing conservatism. Above the entrance visitors can read “To every age its art. To art its freedom”, which symbolizes the Secessionists’ desire to explore the possibilities of art outside the confines of tradition. The main theme of the Congress “From big data to personalized therapy – biostatistics meets molecular medicine” somehow mirrors this effort. The Vienna congress will focus on new ways on how research methodologies might change in the near future and why Nephrology is on the top list of areas that can benefit from these developments.

We all hope that you will join us at this event and share some great days of education and science but also use your visit to enjoy one of the most beautiful cities located in the heart of Europe.

Gert Mayer
53rd Congress President

Andrzej Wiścèk
ERA-EDTA President

Danilo Fliser
Chair of the Scientific Committee
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Andrzej Więcek, Poland

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Peter Stenvinkel, Sweden
Nicholas Topley, United Kingdom
Wim Van Biesen, Belgium
Andrzej Więcek, Poland
Mahmut Yilmaz, Turkey
Important Addresses

**SCIENTIFIC PROGRAMME**

*Congress Presidents*

**ERA-EDTA President**  
Andrzej Więcek  
Department of Nephrology, Transplantation and Internal Medicine  
Medical University of Silesia in Katowice  
Francuska 20-24  
PL-40-027 Katowice - Poland  
Fax: +48-32-2553726  
E-mail: awiecek.president@era-edta.org

**Congress President**  
Gert Mayer  
Department of Internal Medicine IV (Nephrology and Hypertension)  
Medical University Innsbruck  
Anichstrasse 35 A - 6020 Innsbruck - Austria  
Fax: +43-512-50425857  
E-mail: gert.mayer@i-med.ac.at

**ÖGN President**  
Karl Lhotta  
Dept. of Nephrology and Dialysis  
Landeskranchenhaus Feldkirch  
6800 Feldkirch - Austria  
Fax: +43-5522-3037506  
E-mail: karl.lhotta@lkhf.at

**Congress Secretary**  
Alexander Rosenkranz  
Medical University Graz  
Department of Internal Medicine  
Clinical Division of Nephrology  
Auenbruggerplatz 27  
8036 Graz - Austria  
Fax: +43-316-38514426  
alexander.rosenkranz@medunigraz.at

**Chair of the Scientific Committee**  
Danilo Fliser  
Saarland University Medical Centre  
Dept. Internal Medicine IV  
D-66424 Homburg/Saar - Germany  
Fax: +49-6841-1623540  
E-mail: indfli@uks.eu

**CONGRESS SECRETARIAT**

**ERA-EDTA Congress Office**  
Via XXIV Maggio 38  
I-43123 Parma - Italy  
Phone: +39-0521-989078  
Fax: +39-0521-959242

**Registrations**  
E-mail: registrations@era-edta.org  
Phone: +39-345-0211784  
Fax: +39-0521-959242

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**Sales Contact**  
Mr. Paolo Zavalloni  
ERA-EDTA Congress Office  
Phone: +39-345-4592758  
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Skype: PaoZav  
E-mail: zavalloni@era-edta.org

**ERA-EDTA Membership Office**  
Via XXIV Maggio 38  
I-43123 Parma - Italy  
Phone: +39-344-1409706  
Fax: +39-0521-959242  
E-mail: membership@era-edta.org  
www.era-edta.org

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E-mail: oegn@vlkh.net

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C-IN  
5. kvetna 65  
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**FRIDAY, MAY 20 2016 - REGISTRATION DAY**

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**SATURDAY, MAY 21 2016 - DAY 1**

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<td>18.00 - 19.30</td>
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<td>09.30 - 10.45</td>
<td>Poster session, coffee break and exhibition visit</td>
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<td>Plenary Lecture 1</td>
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<td>11.45 - 13.15</td>
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<td>Industry Symposia</td>
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<td>11.45 - 13.15</td>
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<tr>
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<td>Industry Symposia</td>
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<td>Plenary Lecture 3</td>
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<td>Symposia Free Communications + Mini Lectures</td>
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<tr>
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<td>13.15 - 14.45</td>
<td>Symposia Free Communications + Mini Lectures</td>
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<tr>
<td>14.45 - 16.15</td>
<td>Symposia</td>
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<td>09.30 - 14.30</td>
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*open only to ERA-EDTA members*
PLENARY LECTURES

A network-oriented view of living systems to complement the reductionist
Andrew Kasarskis, New York, U.S.A.

Is it time for one-person trials?
Nicholas Schork, La Jolla, U.S.A.

Transplantation tolerance: can it turn into a reality?
Kathryn Wood, Oxford, United Kingdom

MINI LECTURES

The endothelial surface layer and the development of glomerular disease
Ton J. Rabelink, Leiden, The Netherlands

Fundamental mechanisms of osmosis - revisited
Johann Morelle, Brussels, Belgium

Inflammation, immunity and hypertension
Speaker to be confirmed

How to improve HD outcome in children: more convection, more time, more sessions?
Michel Fischbach, Strasbourg, France

Role of stem cells in kidney regeneration
Michal Chmielewski, Gdańsk, Poland

Testing for mutations in FSGS: should every patient undergo it?
Speaker to be confirmed

Directly acting anti-HCV agents: ready for use in CKD/ESRD?
Michel Jadoul, Brussels, Belgium

The value of kidney biopsy for the choice of therapy in patients with chronic GN
Loreto Gesualdo, Bari, Italy

Anti PLA2R antibodies and outcome of membranous nephropathy
Elion Hoxha, Hamburg, Germany

Guidelines in nephrology: what was expected? What was achieved?
Garabed Eknoyan, Houston, U.S.A.

Are international guidelines relevant in low and middle income countries?
Faïcal Jarra, Sfax, Tunisia

The future impact of schistosomal nephropathies
Rashad Barsoum, Cairo, Egypt

How to prescribe Metformin in CKD
Marc E. De Broe, Antwerp, Belgium

Potential anti-ageing interventions in CKD
Peter Stenvinkel, Stockholm, Sweden

Iron supplementation and infections
Gert Mayer, Innsbruck, Austria

Blood pressure management in patients with CKD
Ivan Rychlik, Prague, Czech Republic

Vitamin D for better survival in CKD - any evidence?
David Goldsmith, London, United Kingdom

Uremic toxins - how far did we come in 2016?
Angel Argiles Ciscart, Montpellier, France

How valid are surrogate endpoints in nephrology research?
Carmine Zoccali, Reggio Calabria, Italy

Cardiovascular complications in CKD patients - what we have learned during the last 10 years?
Petar Kes, Zagreb, Croatia

Post-translational molecule modifications in uremia - only a biochemical issue?
Danilo Fliser, Homburg/Saar, Germany

Interventions to reduce progression of CKD - what is the evidence?
John Feehally, Leicester, United Kingdom

The emerging role for bone alkaline phosphatase isoforms in chronic kidney disease - mineral and bone disorder
Mathias Haarhaus, Stockholm, Sweden

Does calcium dialysate matter?
Ercan Ok, Izmir, Turkey

Haemodynamic modifications induced by dialysis vascular access
Carlo Basile, Taranto, Italy

The wearable kidney device: where do we stand in 2016?
Claudio Ronco, Vicenza, Italy

Peritoneal dialysis - what is new in 2016?
Monika Lichodziejewska-Niemierko, Gdańsk, Poland

Mesenchymal stem cells as a potential pretransplant desensitization tool
Speaker to be confirmed

Challenges of transplant rejection diagnosis
Kerstin Amann, Erlangen, Germany
Blood pressure variability and the kidney
Mustafa Arici, Ankara, Turkey

Clinical studies that target inflammation in diabetic nephropathy
Peter Rossing, Gentofte, Denmark

Management of hyponatremia - what do the guidelines say?
Goce Spasovski, Skopje, F.Y.R. of Macedonia

Antonino D’Antona and the first description in 1909 of the crush syndrome with renal failure after the Messina earthquake
Natale Gaspare De Santo, Naples, Italy
In collaboration with the International Association for the History of Nephrology (IAHN)

SYMPOSIA

**Track 1**
Fluid and electrolytes, tubular transport, physiology

- **When cell biology meets tubular transport**
  - mTOR and autophagy in tubular health and injury
    Tobias Huber, Freiburg, Germany
  - The endolysosomal system in the proximal tubule
    Olivier Devuyst, Zurich, Switzerland
  - Regulation of sodium channel trafficking
    Olivier Staub, Lausanne, Switzerland
  - Cell biology of collecting duct water transport
    Robert Fenton, Aarhus, Denmark

- **Sensing mechanisms in nephrology**
  - Calcium-sensing in the kidney
    Pascal Houillier, Paris, France
  - Phosphate
    J. Mariano Rodriguez, Cordoba, Spain
  - Renal and extrarenal sensing of acid-base
    Carsten Wagner, Zurich, Switzerland
  - Potassium
    David Ellison, Portland, U.S.A.

- **Hypoxia in kidney disease: integrating pre-clinical with clinical research**
  - Oxygen sensing in the kidney
    Volker Haase, Nashville, U.S.A.
  - Development of novel drugs targeting renal hypoxia and anaemia
    Masao Mi Nangaku, Tokyo, Japan
  - Imaging oxygen metabolism: new finding in both animal and human studies
    Christoffer Laustsen, Aarhus, Denmark
  - MRI paradigms to assess renal haemodynamics and oxygenation in human studies
    Speaker to be confirmed

**Track 2**
Hereditary disorders, development, pregnancy, paediatric nephrology

- **Actualities in hereditary disorders**
  - ADPKD in children: new perspectives
    Francesco Emma, Rome, Italy
  - Genetic testing for rare disorders: practical steps
    Nine V.A.M. Knopers, Utrecht, The Netherlands
  - Inherited tubulopathies
    Olivier Devuyst, Zurich, Switzerland
  - Ciliopathies and cystic disorders
    Carsten Bergmann, Ingelheim am Rhein, Germany

- **Dialysis and transplantation in children**
  - Optimising BP control in CKD and dialysis patients
    Fabio Pagliolonga, Milan, Italy
  - What have we learnt from peritoneal membrane biopsies: bench to bedside
    Claus Peter Schmitt, Heidelberg, Germany
  - CKD-MBD in children: is bone disease the heart of the problem?
    Rukshana Shroff, London, United Kingdom
  - Corticosteroid-free kidney transplantation
    Ryszard Grenda, Warsaw, Poland

- **Development and pregnancy**
  - CACUT
    Speaker to be confirmed
  - Renal progenitor cells to model inherited disorders
    Paola Romagnani, Florence, Italy
  - Immunisation in pregnancy leads to membranous nephropathy
    Pierre Ronco, Paris, France
  - Pathophysiology of pre-eclampsia
    Matthew Hall, Nottingham, United Kingdom

**Track 3**
Glomerular diseases and general clinical nephrology

- **Kidney in systemic inflammatory diseases**
  - B cell cytokine blockade in SLE
    David Jayne, Cambridge, United Kingdom
  - New and old auto-antibodies for lupus nephritis
    Gian Marco Ghiggeri, Genoa, Italy
  - Biologic drugs in the treatment of vasculitis
    Vladimir Tesar, Prague, Czech Republic
  - New ways to interfere with the complement system
    Giuseppe Remuzzi, Bergamo, Italy

- **What precipitates IgAN and what is the target for treatment?**
  - Genetic determination in IgA Nephropathy
    Krzysztof Kiryluk, New York, U.S.A.
  - The intestine-renal connection
    Rosanna Coppo, Turin, Italy
  - Shall we treat intestinal immunity only?
    Bengt Fellström, Uppsala, Sweden
  - Shall we treat the systemic inflammation? Lessons from STOP IgAN
    Jürgen Floege, Aachen, Germany
Preliminary Scientific Programme

• Renal fibrosis: new insights
  - Perivascular progenitors, Hedgehog signaling and kidney fibrosis
    Rafael Kramann, Aachen, Germany
  - The role of microvascular endothelium in progressive kidney disease
    Bernd Hohenstein, Dresden, Germany
  - New mediators of renal fibrosis, or the road to therapy
    Christos Chatziantoniou, Paris, France
  - Established mediators of renal fibrosis - where are the clinical trials?
    Roel Goldschmeding, Utrecht, The Netherlands

• Membranous nephropathy: new insights
  - The pathogenetic and clinical role of glomerular antigens in membranous nephropathy
    Rolf A.K. Stahl, Hamburg, Germany
  - The PLA2R autoantigen: from pathophysiology to patients’ care
    Pierre Ronco, Paris, France
  - Calcineurin inhibitors in membranous nephropathy
    Manuel Praga, Madrid, Spain
  - Rituximab in membranous nephropathy
    Piero Ruggenenti, Bergamo, Italy

• Immunology and the kidney
  - NETs, histones and necroinflammation in kidney disease
    Hans-Joachim Anders, Munich, Germany
  - T cells in glomerulonephritis
    Kathrin Eller, Graz, Austria
  - Kidney dendritic cells in acute and chronic renal disease
    Christian Kurts, Bonn, Germany

• The gut-renal axis
  - Microbiome and inflammatory disease
    Timothy Meyer, Palo Alto, U.S.A.
  - Gut microbiota and uremic toxins
    Pieter Evenepoel, Leuven, Belgium
  - The nasal microbiome in granulomatosis with polyangiitis (GPA, Wegener’s)
    Andreas Kronbichler, Innsbruck, Austria
  - lgAn and microbiota
    Speaker to be confirmed

• Lingering questions in CKD
  - Is early nephrology care so important in stage 3b-4 CKD patients?
    Goce Spasovski, Skopje, F.Y.R. of Macedonia
  - Is sleep apnea a really major problem in CKD?
    Hypotheses and observations
    Sydney Tang, Hong Kong, Hong Kong, P.R. China
  - Cardiac autonomic neuropathy in CKD patients with diabetes: relevant? preventable? treatable?
    Speaker to be confirmed

• Management of the frail and elderly with CKD
  - Nutritional status: evaluation and improvement
    Denis Fouque, Lyon, France
  - Should dialysis be different in the frail elderly?
    Olof Heimbürger, Stockholm, Sweden
  - Withholding and withdrawal of dialysis: models of care
    Jacques Bernheim, Tel Aviv, Israel
  - Models for prediction of need for RRT vs risk of death in the elderly
    Evi Nagler, Ghent, Belgium

• Aging and CKD
  - Eva & ADAM: impact on aging kidneys
    Alberto Ortiz, Madrid, Spain
  - BOLD MRI: a key measure to diagnose ischemic nephropathy
    Menno Pruijm, Lausanne, Switzerland
  - Aortic aging in ESRD: structural, hemodynamic and mortality implications
    Gérard London, Paris, France
  - New markers of frailty: myostatin
    Thomas Bernd Dschietzig, Bensheim, Germany

• Gone with the Wnt
  - Basics about Wnt signaling
    Speaker to be confirmed
  - Wnt signaling in bone diseases
    Martine Cohen-Solal, Paris, France
  - Limitations of the current therapies for osteoporosis in patients with CKD
    Susan M. Ott, Seattle, U.S.A.
  - Sclerostin and the CV System
    Vincent Brandenburg, Aachen, Germany

• New aspects of sex hormones abnormalities in CKD patients
  - Testosterone deficiency - why it is important in male CKD patients
    Mahmut Ilker Yilmaz, Ankara, Turkey
  - Hyperprolactinemia in CKD patients - friend or foe
    Juan Jesus Carrero, Stockholm, Sweden
  - Female infertility in CKD and antimüllerian hormone
    Marcin Adamczak, Katowice, Poland
  - Sexuality after successful kidney transplantation
    Speaker to be confirmed

• Novel oral anticoagulants or warfarin in CKD?
  - Is chronic anticoagulation treatment needed in chronic kidney disease?
    Adrian Covic, Iasi, Romania
  - Do novel oral anticoagulants differ from vitamin K antagonists for efficacy or bleeding?
    Jürgen Floege, Aachen, Germany
  - Stroke and bleeding in atrial fibrillation with chronic kidney disease
    Anne Lise Kamper, Copenhagen, Denmark
  - Novel oral anticoagulants or warfarin in CKD - a cardiologists perspective
    Karolina Szummer, Stockholm, Sweden
**Lipids in nephrology**
- Lipoproteins in Nephrology: clinical importance and therapeutic options  
  Kurt Derfler, Vienna, Austria  
- Compositional changes of lipids in CKD  
  Speaker to be confirmed  
- Lipid lowering in CKD: yes, no, maybe  
  Christoph Wanner, Würzburg, Germany  
- Lipids and CKD progression: myth or reality?  
  Alexander Rosenkranz, Graz, Austria

**Bone, calcium and PTH in CKD**
- The rapidly exchangable calcium pool in hemodialysis patients  
  Markus Pirkblauer, Innsbruck, Austria  
- Clinical evaluation of bone: what makes sense?  
  Daniel Cejka, Vienna, Austria  
- What prophylaxis and therapy is really useful?  
  Sylvie Dusilova Sulkova, Hradec Kralove, Czech Republic  
- Uremic toxins and CKD-MBD  
  Ziad Massy, Paris, France

**Vascular access for HD**
- Pre-operative evaluation of vascular capital  
  Pedro Ponce, Lisbon, Portugal  
- Predictors of fistula function  
  Marko Malovrh, Radomlje, Slovenia  
- Non-pharmaceutical and pharmaceutical strategies to enhance fistula maturation and primary patency  
  Jan H. M. Tordoir, Maastricht, The Netherlands  
- Lock solutions to prevent clothing and infection in tunnelled dialysis catheters  
  Laura Labriola, Brussels, Belgium

**Nutrition in CKD patients**
- Metabolic rationale for enteral support  
  Speaker to be confirmed  
- Clinical trials update in CKD patients (including HD)  
  Wilfred Drumh, Vienna, Austria  
- Should enteral support be identical in HD and PD?  
  Pieter M. Ter Wee, Amsterdam, The Netherlands  
- Low calorie diet in obese patients with CKD  
  Denis Fouque, Lyon, France

**Calcification and calciphylaxis**
- Calcification in heart valves: clinical implications, consequences, therapy  
  Pablo Antonio Ureña Torres, Saint-Ouen, France  
- Evaluation of vascular calcifications  
  Speaker to be confirmed  
- New insights into the FGF23-Klotho axis  
  Tobias Larsson, Stockholm, Sweden  
- Uraemic calciphylaxis - clinical picture, course and therapeutic options  
  Markus Ketteler, Coburg, Germany

**Personalized dialysis**
- Frequent or longer hemodialysis - benefits more than risks?  
  Pantelis A. Sarafidis, Thessaloniki, Greece  
- Dialysis modality choice in diabetic patients with end-stage kidney disease  
  Davide Bolignano, Reggio Calabria, Italy  
- Dialysis modalities and interventions to reduce intradialytic symptoms  
  Andrew Davenport, London, United Kingdom  
- Is online HDF the new standard for extracorporeal therapy?  
  Francesco Locatelli, Lecco, Italy

**Bone, calcium and PTH in CKD**
- The rapidly exchangable calcium pool in hemodialysis patients  
  Markus Pirkblauer, Innsbruck, Austria  
- Clinical evaluation of bone: what makes sense?  
  Daniel Cejka, Vienna, Austria  
- What prophylaxis and therapy is really useful?  
  Sylvie Dusilova Sulkova, Hradec Kralove, Czech Republic  
- Uremic toxins and CKD-MBD  
  Ziad Massy, Paris, France

**Vascular access for HD**
- Pre-operative evaluation of vascular capital  
  Pedro Ponce, Lisbon, Portugal  
- Predictors of fistula function  
  Marko Malovrh, Radomlje, Slovenia  
- Non-pharmaceutical and pharmaceutical strategies to enhance fistula maturation and primary patency  
  Jan H. M. Tordoir, Maastricht, The Netherlands  
- Lock solutions to prevent clothing and infection in tunnelled dialysis catheters  
  Laura Labriola, Brussels, Belgium

**Nutrition in CKD patients**
- Metabolic rationale for enteral support  
  Speaker to be confirmed  
- Clinical trials update in CKD patients (including HD)  
  Wilfred Drumh, Vienna, Austria  
- Should enteral support be identical in HD and PD?  
  Pieter M. Ter Wee, Amsterdam, The Netherlands  
- Low calorie diet in obese patients with CKD  
  Denis Fouque, Lyon, France

**Calcification and calciphylaxis**
- Calcification in heart valves: clinical implications, consequences, therapy  
  Pablo Antonio Ureña Torres, Saint-Ouen, France  
- Evaluation of vascular calcifications  
  Speaker to be confirmed  
- New insights into the FGF23-Klotho axis  
  Tobias Larsson, Stockholm, Sweden  
- Uraemic calciphylaxis - clinical picture, course and therapeutic options  
  Markus Ketteler, Coburg, Germany

**PD clinical science**
- Bio-impedance: coming of age?  
  Speaker to be confirmed  
- Transition between modalities: what do we (not yet) know?  
  Christopher T. Chan, Toronto, Canada  
- Management of infections in PD  
  Anabel Rodrigues, Porto, Portugal  
- Outpatient peritoneal dialysis catheter insertion is safe and cost-saving  
  Speaker to be confirmed  
- Should PD as initial dialysis modality become the standard of care?  
  - CKDopps: optimal timing of dialysis initiation and modality selection  
  - Urgent start of PD: PD first as standard of care?  
  - How can residual renal function be preserved?  
  - PDopps: optimizing PD and reducing technique failure rate  
  Speaker to be confirmed  

**Quality Improvement in PD (ISPD)**
- Updates on ISPD Peritoneal Dialysis Infection Guidelines  
  Philip Li, Hong Kong, Hong Kong, P.R. China  
- Integrating geriatric care for older patients on PD  
  Edwina Brown, London, United Kingdom  
- ISPD Cardiovascular and Metabolic Guidelines  
  Rajnish Mehrotra, Seattle, U.S.A.
Track 7
Transplantation and immunology

• Improving cardiovascular risk assessment in transplant patients
  - Metabolic risk factor profile before and after renal transplantation
    Adnan Sharif, Birmingham, United Kingdom
  - Non-invasive cardiac imaging in the evaluation of kidney transplant candidates
    Alan Jardine, Glasgow, United Kingdom
  - 24h-ABPM in renal transplant patients: the nocturnal BP burden
    Francesca Mallamaci, Reggio Calabria, Italy
  - How to approach post-transplant diabetes?
    Marcus Säemann, Vienna, Austria

• The living kidney donor
  - Development of CVD risk factors shortly after donation
    Alaattin Yildiz, Istanbul, Turkey
  - The Oslo experience: long term risk after donation
    Geir Mjøen, Oslo, Norway
  - Practice patterns for follow up of the kidney donors
    Bruno Watschinger, Vienna, Austria
  - Psychological outcomes after living kidney donation
    Hannah Maple, London, United Kingdom

• Lingering issues in kidney transplantation
  - Pre-emptive kidney re-transplantation - If yes, when and for whom?
    Maria Alicja Debska-Slizien, Gdansk, Poland
  - Immune surveillance after kidney transplantation
    Martina Sester, Homburg/Saar, Germany
  - How to diminish the long-term renal allograft loss?
    Marian Klinger, Wroclaw, Poland

• How to handle the sensitized kidney transplant recipient
  - Precision diagnosis and risk stratification in kidney transplantation
    Alexandre Loupy, Paris, France
  - Desensitization protocols: is there a favorite?
    Georg A. Bühmg, Vienna, Austria
  - Treatment of ABMR: when to treat and what tools do we have?
    Søren Schwartz Sørensen, Copenhagen, Denmark
  - Paired kidney donation
    Ondrej Viklicky, Prague, Czech Republic

• DGF: how to prevent it?
  - Intrarenal molecular events after death
    Alberto Ortiz, Madrid, Spain
  - Integrational aspects of DGF - towards a rational treatment
    Rainer Oberbauer, Vienna, Austria
  - Machine perfusion to preserve or to resuscitate: where are we today?
    Ina Jochmans, Leuven, Belgium
  - Ischemic pre-conditioning in kidney transplantation outcomes: is time for a trial?
    Daniel Abramowicz, Brussels, Belgium

Track 8
Hypertension, diabetes, vascular disease

• Salt on the table
  - Salt consumption and cardiovascular disease: from etiology to prevention
    Francesco Paolo Cappuccio, Coventry, United Kingdom
  - Salt consumption and renal outcomes
    Speaker to be confirmed
  - Dialysate sodium: friend or foe?
    Mustafa Arici, Ankara, Turkey

• Uremic cardiomyopathy
  - Thick but weak: the pathophysiology of uremic cardiomyopathy
    Kerstin Amann, Erlangen, Germany
  - Non-invasive assessment of cardiac structure and function - what nephrologists must know
    Frank Flachskampf, Uppsala, Sweden
  - Clinical consequences: cardiac arrhythmia and SCD
    Philip A. Kalra, Salford, United Kingdom
  - Future perspectives in the treatment of uremic cardiomyopathy
    Marc Vervloet, Amsterdam, The Netherlands

• Heart failure with preserved ejection fraction (HFPEF): the cardiorenal syndrome revisited
  - Pathogenesis
    Loek Van Heerebeek, Amsterdam, The Netherlands
  - Diagnosis and prognostic implications of HFPEF in CKD
    Gunnar Heine, Homburg/Saar, Germany
  - Therapy
    Burkert Pieske, Berlin, Germany

• Obesity and fat tissue – what is new and what is relevant for nephrologists?
  - New classification of obesity – not only BMI
    Speaker to be confirmed
  - Obesity - a disease with many aetiologies disguised in the same oversized phenotype
    Peter Stenvinkel, Stockholm, Sweden
  - Metabolic syndrome and renal outcome - a reappraisal
    Andrzej J. Więcek, Katowice, Poland
  - Renal consequences of bariatric surgery - the downsides
    Allon Friedman, Indianapolis, U.S.A.
Track 9
Acute kidney injury and intensive care nephrology

- Cross-talk between kidneys and other organs in AKI
  - AKI and the heart
    Claudio Ronco, Vicenza, Italy
  - AKI and the lung
    Carmine Zoccali, Reggio Calabria, Italy
  - Novel evidence on the treatment of hepatorenal syndrome
    Fabrizio Fabrizi, Milan, Italy
  - AKI in pregnancy
    Fadi Fakhouri, Nantes, France

- AKI - pathophysiology and definition
  - Biomarkers as a tool to understand pathophysiology of AKI
    Jill Vanmassenhove, Ghent, Belgium
  - Looking through RIFLE, AKIN and KDIGO glasses: do we see the same?
    Marlies Ostermann, London, United Kingdom
  - Acute intestinal nephritis: an overlooked cause of AKI?
    Manuel Praga, Madrid, Spain
  - CKD imposed on AKI and vice versa
    Mehmet Sukru Sever, Istanbul, Turkey

- Fluid management in the ICU
  - Prevent the kidneys from drowning - How to assess fluid status in ICU patients
    Jan T. Kielstein, Braunschweig, Germany
  - How to manage fluids in pediatric ICU patients?
    Johan Vande Walle, Ghent, Belgium
  - In whom when which type of fluid: state of the art
    Can Ince, Rotterdam, The Netherlands
  - Fluid overload at cardiac ICU: diuretics, slow ultrafiltration or peritoneal dialysis?
    Speaker to be confirmed

- Special technological aspects of ICU nephrology and extracorporeal treatment
  - CO2 removal: indications, outcomes, technology
    Eric Hoste, Ghent, Belgium
  - Liver dialysis: technology, indications, outcomes
    Achim Joerres, Berlin, Germany
  - ICU dialysis in the paediatric setting: outcomes and technological considerations
    Franz Schaefer, Heidelberg, Germany
  - Extracorporeal treatment of immune mediated kidney disease
    George Reusz, Budapest, Hungary

- Special situations with need for nephrology advice
  - Prevention and management of AKI in the general ward: the UK experience
    Nicholas Selby, Derby, United Kingdom
  - How and when (not) to dialyse the frail and elderly with AKI
    Wim Van Biesen, Ghent, Belgium
  - Pharmacokinetics of drugs in AKI and during RRT: what we should know?
    Speaker to be confirmed

SPECIAL SYMPOSIA

- Tomorrow’s nephrology presented by the nephrologists of tomorrow
  (YNP – Young Nephrologists’ Platform)
  - Update on YNP initiatives
    Ana Carina Ferreira, Lisbon, Portugal
  - Let’s talk about death! Regulated necrosis in acute kidney injury
    Andreas Linkernann, Kiel, Germany
  - Immune monitoring in kidney transplant recipients
    Speaker to be confirmed
  - Recent developments in atypical haemolytic uraemic syndrome
    Speaker to be confirmed

- ERA-EDTA Registry
  - Lifetime risk of Renal Replacement Therapy in Europe
    Jan Van Den Brand, Nijmegen, The Netherlands
  - Transplanting kidneys from older deceased donors: a comparison of outcomes in young and old recipients
    Maria Pippias, Amsterdam, The Netherlands
  - Vascular access in children on hemodialysis
    Michael Böhm, Vienna, Austria
  - Prevalence of obese sarcopenia among elderly Stage 4 CKD patients and effect of muscle wasting on quality of life
    Speaker to be confirmed

- The Dialysis Outcomes and Practice Patterns Study (DOPPS) Program:
  Celebrating 20 Years and Looking Ahead
  - The DOPPS Program continues to grow and invites collaborators
    Francesca Tenatori, Ann Arbor, U.S.A.
  - Key lessons from the first 20 years of DOPPS
    Michel Jadoul, Brussels, Belgium
  - Selected findings from the first EURODOPPS call for proposals
    Karlijn van Stralen, Amsterdam, The Netherlands
  - CKDopps: Improving outcomes in advanced CKD and the transition to dialysis
    Ziad Massy, Paris, France
  - PDOPPS: the largest international study of PD practices
    Simon Davies, Stoke-on-Trent, United Kingdom

- Ethics
- Late Breaking Clinical Trials
- NDT Polar Views
- The Lancet
- ERA-EDTA & European Society of Cardiology (ESC)
- ERA-EDTA & European Society of Hypertension (ESH)
Preliminary Scientific Programme

• ERA-EDTA & European Society for Paediatric Nephrology (ESPN)
• ERA-EDTA & International Society of Nephrology (ISN)
• ERA-EDTA & Japanese Society of Nephrology (JSN)
• American Society of Nephrology Highlights (ASN)

MASTERCLASS

Managing PD patients - from basic principles to advanced practice
- PD catheter: life line or strangling device?
  Martin Wilkie, Sheffield, United Kingdom
- Adequate PD prescription: balancing different interests
  Speaker to be confirmed

CME COURSES

• News in the diagnostics and treatment of glomerular disease
  (IWG - Immunonephrology Working Group)
• Practical issues in kidney transplantation
  (DESCARTES Working Group - Developing Education Science and Care for Renal Transplantation in European States)
  In collaboration with EKITA, a section of ESOT
• A preview of the future in cardiovascular risk management in CKD
  (EURECA-m Working Group - EUropean REnal and CArdiovascular Medicine)
• Hemodiafiltration - the new standard of care?
  (Eudial Working Group - European Dialysis Working Group)
• Diabetes and obesity in renal disease
  (DIABESITY - Working Group researching on the nephrological impact in relation to diabetes and obesity)
• As we grow old - nutritional considerations for the CKD elderly patient
  (ERN – European Renal Nutrition Working Group)

• Inherited Disorders: the kidney and beyond
  (WGIKD - Working Group on Inherited Kidney Disorders)
• New insights into CKD-MBD
  (CKD-MBD Working Group)
• Peritoneal dialysis in 2016 - where do we stand?
  (EuroPD)
• Uraemia: is it only a toxin affair?
  The emerging concept of networking
  (EUTox Working Group - European Uremic Toxin)
• Rheumatology for nephrologists
• Disasters and the Nephrologist
• Amyloidosis – old problem, new issues
• Including the patient perspective in renal care
• Transplantation immunology - an update
• Non-pharmacological treatment of resistant hypertension – consensus for 2016
• Less is more: why ‘treating to targets’ does not improve outcome of CKD patients?
• Nephrolithiasis and CKD
  (In collaboration with EULIS, the EAU Section of Urolithiasis)
• Crosstalk in renal epidemiology
  (ERA-EDTA Registry)
• Toxicology for nephrologists
• Publishing Workshop
Communications should concern all aspects of nephrology, the prevention and treatment of renal diseases and associated conditions or the scientific background to the study of the kidney.

GENERAL RULES
All abstracts must be submitted electronically through the congress website at the address www.era-edta2016.org.

All abstracts must be received by January 15, 2016.

Abstracts received after this date cannot be considered by the Paper Selection Committee.

CONFIRMATION
You will automatically receive an e-mail confirming our receipt of your abstract.

NOTIFICATION
The Presenting Author of each abstract accepted for publication will be notified by March 23, 2016. If the Presenting Author is unable to present the abstract, another co-author can take his/her place. A letter from the Presenting Author about the change is requested and must be received by the ERA-EDTA Congress Office no later than April 10, 2016.

WITHDRAWAL / CHANGES
Submitted abstracts cannot be withdrawn or changed. No exceptions will be made.

ORIGINAL ABSTRACTS
Submitted abstracts must describe unpublished work which is not already in press and which is not awaiting possible acceptance by any other society that publishes its proceedings.

LANGUAGE
All abstracts must be written in English.

HOW TO SUBMIT ABSTRACTS
Only submission through the congress website is possible. Abstracts sent by post or email will not be accepted. You can send your abstracts from October 27, 2015. Please go to the congress website at the address www.era-edta2016.org and follow the instructions for abstract submission. All authors of correctly written and successfully submitted abstracts will receive confirmation by e-mail. Should you experience any unforeseen problems with the electronic submission, please contact the ERA-EDTA Congress Office at abstracts@era-edta.org.

Do not mail or fax your abstract to the ERA-EDTA Congress Office.

PUBLICATION
All abstracts accepted for presentation (either oral or poster) will appear in NDT. Abstracts will appear exactly as submitted.

Any abstract considered unsuitable for reproduction will not be published.

LATE BREAKING CLINICAL TRIALS
The ERA-EDTA will consider abstracts related to unpublished clinical trials for a special “Late breaking clinical trials” session. The following trials will be considered for evaluation if they comply with the required characteristics:
- a prospective randomised intervention in renal patients (medications, education, dietetics, physiotherapy, etc…), including at least 100 patients;
- a prospective observational study, including at least 500 patients;
- approved by an institutional ethical committee;
- not previously reported or published.

Abstracts may be accepted as oral communications or posters, after regular evaluation by the review committee. The LBCT abstracts can be submitted through the congress website (www.era-edta2016.org) from February 22 to March 14, 2016.

Abstracts which do not meet the criteria above will not be considered for presentation.

IMPORTANT INFORMATION FOR YOUNG ABSTRACT AUTHORS

- ERA-EDTA STANLEY SHALDON AWARD FOR YOUNG INVESTIGATORS
  If you are 40 years old or younger, and your abstract is considered one of the best ones submitted to the last three ERA-EDTA Congresses, you can win the ERA-EDTA Stanley Shaldon Award for Young Investigators.
  The winner will receive the award during the Opening Ceremony of the annual ERA-EDTA Congress.
  The award consists in a special invitation to participate in the ERA-EDTA Congress in which the award is given; three years of ERA-EDTA membership; an ex-officio position in the Young Nephrologists’ Platform Board and a prize of EUR 10,000. Do not miss this unique opportunity to submit your abstract to the ERA-EDTA!
  For more information you can go to our website www.eraedta.org (click on “About ERA-EDTA” and then on “ERA-EDTA Awards”).

- YOUNG Nephrologists’ PLATFORM “FREE MEMBERSHIP PROJECT”
  A 1-year free ERA-EDTA membership will be given, automatically, to the 30 young people who have submitted an accepted abstract to an ERA-EDTA Congress. Only young people (< 40 years of age) who are already ERA-EDTA MEMBERS and YNP MEMBERS can receive this free ERA-EDTA membership. More information will be available during the abstract submission procedure.

Abstract submission deadline
JANUARY 15, 2016
Travel Grants

Also this year the ERA-EDTA has decided to give up to 90 travel grants to attend the Vienna Congress to the best rated abstracts in the various categories. The Presenting Authors must be 40 years old, or younger, by December 31, 2016.

All awardees will receive:

a) Free congress membership;

b) A grant for EUR 500, except for the Presenting Authors of the best abstracts of each category whose grant will be of EUR 1,000.

The Presenting Authors of the two best abstracts of each category, independently of age, will also receive a diploma.

To apply, please fill in the appropriate fields during the abstract submission at www.era-edta2016.org.

TRAVEL GRANT FOR THE BEST ABSTRACT ON HISTORY OF NEPHROLOGY

A travel grant of EUR 1,000 will be given to the best abstract submitted under the “History of Nephrology” category by a young author (40 years old, or younger, by December 31, 2016).

To apply, please fill in the appropriate fields during the abstract submission at www.era-edta2016.org.

TRAVEL GRANT FOR THE BEST ABSTRACT ON GERIATRIC NEPHROLOGY

Thanks to a generous grant from the International Society of Geriatric Nephrology and Urology (ISGNU), meant to honour the memory of Prof. Dimitrious G. Oreopoulos, ERA-EDTA will give a travel grant of EUR 1,500 to the best abstract on geriatric nephrology submitted by a young author (40 years old, or younger, by December 31, 2016).

Abstracts can be related to all aspects of geriatric nephrology and can be submitted under any of the abstract categories.

To apply, please fill in the appropriate fields during the abstract submission at www.era-edta2016.org.

We “ASQ” for your help for young nephrologists in developing countries

ERA-EDTA has circulated an electronic feedback questionnaire aimed at collecting impressions, suggestions and remarks among the delegates of the 2014 and 2015 Congresses, held in Amsterdam and London respectively.

Based on the final number of feedback questionnaires completed, ERA-EDTA will offer congress grants to young nephrologists living in developing countries (GDP < USD 10,000) to attend the ERA-EDTA Congress in Vienna. The winners will be chosen among those who have submitted an abstract which is then accepted for presentation at Congress. This initiative, named Altruistic Support by Questionnaire (ASQ), has become part of the exclusive ERA-EDTA advantages for young nephrologists living in disadvantaged areas of the world where education and scientific updates are needed.

The Presenting Authors must be 45 years old, or younger, by December 31, 2016.

To apply, please fill in the appropriate fields during the abstract submission at www.era-edta2016.org.

Announcement of the Austrian ERA-EDTA National Society Grant

The first author (below 40 years of age) of the highest ranked abstract submitted from Austria will be awarded this year’s ERA-EDTA National Society Grant for Austria. The grant includes free registration for the 2017 ERA-EDTA congress and three years free ERA-EDTA membership. The winner will be announced at the Austrian Society of Nephrology’s Dialysis and Transplantation Registry session.
Abstract Categories

A) Acid-base/Na, K, Cl, uric acid.
C) Renal development and cystic diseases.
D) Genetic diseases and molecular genetics.
E) Renal pathology. Experimental and clinical.
F1) Hypertension. Experimental.
F2) Hypertension. Clinical.
G) Nephrolithiasis, divalent ions and divalent ions disorders.
H) Clinical Nephrology, primary and secondary glomerulonephritis.
I2) Acute Kidney Injury – Clinical.
J1) Chronic Kidney Disease. Lab methods, GFR measurement, urine proteomics.
J7) Chronic Kidney Disease. Rehabilitation.
K1) Diabetes - Basic research.
K2) Diabetes - Clinical studies.
L2) Dialysis. Peritoneal dialysis.
L3) Dialysis. Cardiovascular complications.
L4) Dialysis. Vascular access.
L7) Dialysis. Epidemiology, outcome research, health services research.
L8) Dialysis. Protein-energy wasting, inflammation and oxidative stress.
M1) Renal transplantation. Experimental, immune-tolerance of allogenic and xenogenic transplants.
M2) Renal transplantation. Clinical.
N) Paediatric Nephrology.
O) History of Nephrology.
ADMISSION
Admission to the scientific sessions is strictly reserved to registered congress members. Minors cannot access the session halls even if accompanied by a registered adult. ERA-EDTA as per EFPIA HCP Code does not extend hospitality in any way to persons other than the registered delegates.

CERTIFICATE OF ATTENDANCE
The certificate of attendance will be sent to all regularly registered delegates by email after the congress. In case you do not receive it, please write to registrations@era-edta.org. If you need a hard copy, you can collect it at the dedicated desk located in the Registration Area of the Austria Center Vienna.

Please notice that the certificate will specify the exact number of days that you will have attended the congress.

CME COURSES
Participation in the CME Courses on May 21, 2016 will be on a “first come first served” basis. The courses are reserved to regularly registered congress members and are included in the registration fee.

In order to participate all regularly registered congress members must go to the session halls and have their badge scanned by the hostesses at the entrance (at participant’s own responsibility).

INSURANCE/LIABILITY
The ERA-EDTA is insured only to meet claims arising from incidents caused by the organisers and their equipment. Participants, exhibitors and visitors are strongly recommended to be properly insured against accidents they may suffer when travelling to and from the Congress and during the Congress itself.

LANGUAGE OF THE CONGRESS
The official language of the Congress is English. No simultaneous translation will be provided.

PRESS CENTRE
For accredited journalists only. Full press working facilities and activities including press conferences, press releases and services for press will be available at the Austria Center Vienna during the Congress.

UEMS CME CREDITS
An application will be made to the European Accreditation Council for Continuing Medical Education (EACCME) for CME accreditation of the 53rd ERA-EDTA Congress and pre-congress CMEs. The EACCME is an institution of the European Union of Medical Specialists (UEMS). Delegates receiving certificates for ECMEC credits must contact their National Accreditation Authority to have the credits recognized (or converted) in their country of practice.

EACCME credits are recognized by the American Medical Association (AMA) towards the Physician’s Recognition Award (PRA). To convert EACCME credit to AMA PRA category 1 credit, you should contact the AMA directly. The total number of CME credits given to the ERA-EDTA Vienna Congress will be posted on the website (www.era-edta2016.org) as soon as they are available.

How to receive UEMS CME credits
ERA-EDTA will track attendance of congress members during the congress in the Austria Center Vienna each day. Regularly registered congress members must go to the session halls and have their badge scanned by the hostesses at the entrance (at participant’s own responsibility). Congress members will then be awarded the number of credits towards the hours actually spent participating in the sessions of the congress.

ERA-EDTA will send UEMS CME certificates to all regularly registered participants by email approximately one month after the end of the Congress. In case you do not receive it by that time, please write to cmecredits@era-edta.org.

VENUE
Austria Center Vienna
IAKW - AG
Internationales Amtssitz- und Konferenzzentrum Wien, AG
Bruno-Kreisky-Platz 1
A-1220 Vienna
Austria
www.acv.at/index.en.html
CONGRESS MEMBERSHIP FEES AND DEADLINES

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<td><strong>ERA-EDTA / ÖGN MEMBER #</strong> (individual and regular group)</td>
<td>EUR 250.00</td>
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**# IMPORTANT: Please note that congress members submitting and paying their registration fee as non-members will not be entitled to reimbursement if, at a later stage, they become members.**

Once the registration has been processed it cannot be changed or reimbursed.

* Student/trainee registrations are available online starting from April 28, 2016. You can also register onsite at the Austria Center Vienna starting from May 20, 2016. In order to be eligible for this fee, students/trainees must be 35 years old or younger, thus the birth year must not be earlier than 1981 furthermore the registration cannot be sponsored by a company/agency/institution etc. You must personally hand over a photocopy of your picture ID (passport, identity card, driving license with birth date), a photocopy of your original student’s card and a signed letter from your mentor/university to prove your student/trainee status. ERA-EDTA reserves the right to verify all declarations.

** Local student registrations are available online starting from April 28, 2016. You can also register onsite at the Austria Center Vienna starting from May 20, 2016. Low congress membership fee is reserved for students living in the country where the congress is held (Austria). In order to be eligible for this fee, local students must be 28 years old or younger, thus the birth year must not be earlier than 1988 furthermore the registration cannot be sponsored by a company/agency/institution etc. In order to register with this special fee you must personally hand over a photocopy of your picture ID (passport, identity card, driving license with birth date), a photocopy of your original student’s card and a signed original letter from your mentor/university to prove your student status. ERA-EDTA reserves the right to verify all declarations.

*** 1-2 Days registrations are available online starting from April 28, 2016. You can also register onsite at the Austria Center Vienna starting from May 20, 2016. This type of registration entitles admission to the session and poster and exhibition halls only on the date mentioned on the congress badge as well as to receive the bag, the proper EACCME/UEMS Credits and Certificate of Attendance for that same day. It is also possible to make two one-day registrations if you are able to attend the congress for two days (consecutive or not).

**** Blank group registration (minimum of 10 and more congress members): bookings and payments must be received by the early deadline of February 24, 2016 and submit the final names by May 4, 2016. Check full information on the congress website www.era-edta2016.org (registration section) or contact the Registration Dept.: registrations@era-edta.org.

HOW TO REGISTER
All registrations must be submitted online at www.era-edta2016.org.

METHOD OF PAYMENT
You can pay online by credit card (Visa, MasterCard and American Express) at the same time as you submit your registration or by direct money transfer to the ERA-EDTA bank account.
Cash payments (EUR) are accepted only onsite.

CANCELLATION POLICY

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No name changes are possible

ERA-EDTA MEMBERSHIP INFORMATION
New applicants and members with outstanding membership fees, wishing to sign up/pay for ERA-EDTA membership in order to benefit from the reduced congress membership registration fee, must apply for membership, or pay the outstanding fees, no later than 10 working days prior to the respective registration deadlines. Please note that congress members submitting and paying their registration fee as non-members will not be entitled to reimbursement if, at a later stage, they become members.

Please check the website www.era-edta2016.org for full information on the congress membership rules.
BOOKING YOUR OWN CONFERENCE TRAVEL IS EASY AS ABC
WITH THE GLOBAL ONLINE BOOKING TOOL FROM STAR ALLIANCE CONVENTIONS PLUS

No matter where you are travelling from, the Star Alliance™ network offers you a wide choice of flights to the 53rd ERA-EDTA Congress in Vienna, Austria.

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You can also save money when you book your flights. Simply quote the Convention Code OS14S16 and you plus one travelling companion will receive a special discount. Better still, no matter which Star Alliance member airline’s frequent flyer programme you belong to, you can earn and redeem miles across all 28 airlines.

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www.staralliance.com
Information correct as of 09/2015
The Austrian capital is world-famous for its rich cultural and historical heritage, that can be sampled in the 100 museums or just by strolling the streets of the old city centre, that belongs to the UNESCO world cultural heritage. Vienna is known as one of the music capitals of the world. There is no other city where so many famous composers have lived, and music tradition is kept alive in Vienna’s famous opera house and concert halls. Modern musicals have replaced the old operetta, with two theatres devoted to this genre alone. Nowadays Vienna is also known as a modern art centre and a city with a very high quality of life. In addition to sites of historical interest the city offers fine examples of innovative architecture, fashionable shopping areas, and moreover samples of Viennese lifestyle in its traditional coffee houses, the Heurigen (wine taverns), trendy bars, sausage vendors and discos.

**Headquarter City**

Vienna is one of the 4 official seats of the United Nations and home to 15 UN organizations, OSZE and OPEC as well as 18 other international organizations. 200 international corporations have their Eastern European headquarters in Vienna (incl. JVC, Heineken, Henkel, Beiersdorf, Siemens) in addition to Austrian companies of global significance (e.g. Wienerberger AG, OMV). Every year, over 100 international companies open a branch office in Vienna.

**Knowledge City**

Over 34,000 people work in Vienna in the field of research and development, 43% of all research activities in Austria take place in Vienna.
AIRPORT TRANSFERS

City Airport Train (CAT)
Non-stop from airport to city centre in just 16 minutes without any stops, every 30 minutes from 05:38 till 23:08, airport check-in at Wien-Mitte City Air Terminal. Single ticket EUR 11,00, return ticket EUR 17,00. Tickets bookable online at www.cityairporttrain.com.

Airport bus
To Schwedenplatz/Morzinplatz: departures every 30 minutes from 04.50 till 00.20, journey time 22 minutes. To West Railway Station/Europaplatz: departures every 30 minutes from 06:00 to midnight, journey time 45 minutes. To Donauzentrum: departures every hour from 07:10 to 20:10, journey time 40 minutes. Single ticket EUR 8,00, return ticket EUR 13,00. For information: www.postbus.at.

Railroad (S-Bahn line S7)
It runs underneath the airport and takes passengers to the city centre (subway and train connections). Trains leave about every 30 minutes from 04:54 to 00:18, journey time 25 minutes. Price: EUR 4,00.

Taxis
Journey time is approximately 20 minutes to inner city. Price for one way is approximately EUR 36,00.

By train
Austrian Federal Railways (ÖBB) offer a well-developed railway network and modern trains that carry you to Vienna in safety and comfort. Vienna can also be easily reached by train from further afield. The ÖBB offer discounts for various groups.

By car and bus
Austria has an excellent network of motorways, expressways and federal highways. From across Europe, Vienna can be reached by bus company Eurolines and by national companies.

Travel in Vienna

Public Transport is safe, clean, fast, efficient and reasonably priced. It consists of a wide network of 5 subway lines (U-Bahn), 28 streetcar lines (trams), 100 bus lines, 31 night lines with short intervals (at peak times 3 to 5 minutes, in the evenings 5 to max. 15 minutes) and operating hours 05.00 to 00.30, night lines from 00.30 to 05.00, night subways every 15 minutes during nights before Saturdays, Sundays and public holidays.

Tickets are available:
• from 27 Wiener Linien ticket offices,
• from about 1,100 tobacconists,
• from over 340 ticket machines,
• on every streetcar and every bus.

Ticket prices relating to Wiener Linien:
• Single Trip: EUR 2,20
• 24h: EUR 7,60
• 2 Days: EUR 18,90
• 3 Days: EUR 21,90
• Vienna Ring Tram: EUR 8,00

Currency
The currency in Austria is the Euro (€ / EUR). Credit cards are widely accepted.

Climate
Weather in Vienna is typically continental, with characteristic, clearly defined seasons. Hot summers with an occasional day of rain and the cold winters mean that the “right” clothing is essential. The temperature is pleasant in the spring and autumn, but there can be cool winds to chill the air. Average temperature in May is 15-20° C.

Language
The mother tongue of Austria is German, and the most commonly spoken foreign language is English.

Electricity
Austria uses 220 Volts AC/alternating current. Plugs and sockets are European standard with 2 round pins.

Shopping
Most shops are open Monday through Friday from 9.00 till 18.30 hrs and Saturday till 17.00 or 18.00 hrs. There are three main shopping areas in Vienna: the Old Town – Vienna’s own special note, the Kohlmarkt & Kärnterstrasse - cool elegance and stylish glamour in exclusive boutiques and the Mariahilferstrasse - the city’s longest and most lively shopping street.

Time Zone
Vienna is in the Central European time zone (CET = GMT / UCT + 1). From the last Sunday in March to the last Sunday in October, summer time is in effect (MESZ).

Tourist Information
For info on sightseeing, tips for dining, shopping, cultural events please visit the official Vienna tourist guide www.vienna.info/en.
VISA/INVITATION LETTER

An invitation letter for visa purposes can be obtained through the ERA-EDTA 53rd Congress website www.era-edta.org. Applicants who require a letter of invitation, will first need to complete the online registration for the 53rd ERA-EDTA Congress. Letters of invitation for spouse/guest registrants will only be provided if the accompanying individual has completed his or her congress registration.

Those who do not require a visa

Nations of EU member states, the European Economic Area (EEA) and Switzerland do not require a visa for entering the Republic of Austria. EII nationals may travel with a passport or national ID card which is valid for the duration of stay. If travelling from one border-free Schengen country to another, however, EII nationals are not required to show a passport or national ID card at the border. It is still recommended that you travel with your passport or ID card to prove your identity when boarding a flight or checking-in at hotels.

A passport valid for three months beyond the length of stay and issued within the past 10 years is required by all nationals of Australia, Canada, UK and USA. Nationals of Australia, Canada, UK and the USA may stay for up to 90 days without a visa. A return ticket might be required for nationals of Australia, Canada and USA.


All other nationals require a visa in order to enter the Schengen Area or the Austrian territory. For stays of up to 90 days per 180 days these individuals require a Schengen visa, given that they do not take up employment.

Those who need a visa

SCHENGEN VISA

The uniform Schengen visa is a short stay visa (e.g. tourism, private visits, short business, conference) for all Schengen countries (Austria, Belgium, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Iceland, Italy, Latvia, Lithuania, Luxembourg, Malta, Netherlands, Norway, Poland, Portugal, Slovakia, Slovenia, Spain, Sweden, Switzerland). Third country nationals who want to travel to the Schengen countries can apply for short stay visas (up to 90 days), which is valid for all Schengen countries. Once you have obtained a visa for one Schengen country, it automatically permits you to enter and travel through any other Schengen country too. Further information on visa regulations and Schengen visas can be found at www.bmeia.gv.at/en. The application itself does not automatically give the right to travel or to get a visa. Visas can only be issued if all necessary preconditions are met. Visa applications have to be lodged at the Austrian Embassy or Consulate in your country of residence. For a list of Austrian representations please check www.bmeia.gv.at/en/embassies-consulates.

According to each individual case the competent embassy or consulate can ask for further documentation. Please verify with the website of the respective diplomatic representation.

APPLICATIONS for short term visas (tourism, private, business, conference)

All visa applicants must apply at the Austrian Embassy or Consulate in person.

Necessary requirements/documents:
- Completed and signed application form.
- Passport picture meeting the ICAO (International Civil Aviation Organisation) criteria (color, 35x45mm).
- Passport (must provide at least two empty pages; the first issue date of your passport must not be more than 10 years ago and the passport must be valid for at least three months after the expiry of the applied visa).
- In some representations applicants must submit biometric data (ten fingerprints taken flat and digitally scanned).
- Copy of passport’s data sheet (containing the passport picture).
- Copies of previous Schengen visa, if any.
- Travel itinerary/reservation (it is not required to submit a prepaid ticket!).
- Travels by car: driver’s licence, green insurance card, certificate of approval.
- Travel, health and accident insurance (limit of liability at least EUR 30,000 and return journey) valid for the Schengen Area.
- For students: confirmation of enrolment (Studienbestätigung).
- Notarised letter of authority of parents of underage children, who travel unaccompanied by their parents.

In addition further documents are required:
- Hotel reservation.
- Proof of sufficient financial means.
- Original invitation to the conference (from conference/congress organisers).
- Proof of registration (payment of registration fee, if applicable).

Consular fees

A decision on a visa application is only possible after the payment of the consular fee and the submission of all documents requested by the consulate. The fee for a visa application for a period of validity of up to 90 days is in general EUR 60,00.

IMPORTANT NOTES

Applications cannot be submitted more than 3 months prior to departure. However please present your application at least 2 months before the intended travel. The consular fees have to be paid when lodging the application; they are not reimbursed in case of refusal. All points of the visa application form have to be filled in completely and correct. Documents missing may cause inadmissibility of the application or delay the application.

Based on info from the Federal Ministry of Foreign Affairs, Republic of Austria, Sept 2015
Hotel Accommodation

C-IN has been appointed as the official housing agent for the upcoming 53rd ERA-EDTA Congress 2016 in Vienna. Room blocks at special rates are being held in most of Vienna hotels of various categories. Hotels are mostly located in the city centre with good connection (U-Bahn) to the venue (Austria Center Vienna).

C-IN
(CZECH-IN s.r.o.)
5. kvetna 65
140 21 Prague 4, Czech Republic
Tel: +420 261 174 304 (or 301)
Fax: +420 261 174 307
Email: hotels.eraedta2016@c-in.eu
web: www.c-in.eu

A full hotel list, inclusive of rates, hotel maps and all relevant info is available on www.era-edta2016-booking.cz. Please note that availability in some of the hotels may be limited. Room rates are indicated per room/per night incl. breakfast and VAT (VAT may be subject to change). Room blocks are being sold on a first-come-first-served basis and an early reservation is highly recommended.

Group Reservations
Please kindly send your request to C-IN at the following address: hotels.eraedta2016@c-in.eu and please do not forget to include all essential information: number of rooms required, arrival and departure dates, room type, preferred hotel or area. An offer based on your requirements will be provided at soon as possible. Alternatively, please feel free to contact us anytime at the above telephone numbers.

Individual Reservations
Individual hotel bookings can be done online via a link on the official Congress website. After completing the hotel booking, the applicant will receive a system notification that reservation request was received (this is not a confirmation of the room). Confirmation of the hotel booking will be issued only after the prepayment is received. Full prepayment is required to guarantee the room. Changes and cancellations must be made in writing to C-IN; the hotels will not accept direct changes. A handling fee of EUR 30,00 will be charged for any change of reservation. Refundable cancellations can be made until March 11, 2016 and the prepaid amount will be refunded, minus a handling fee of EUR 60,00. If your room is cancelled after March 11, 2016, or if you arrive later or depart earlier than reserved, the total amount of accommodation will be charged and no refund can be made.
<table>
<thead>
<tr>
<th>Rating</th>
<th>Hotel name</th>
<th>Area</th>
<th>Distance to the Venue</th>
<th>No on map</th>
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<td>NC</td>
<td>Adagio Vienna City</td>
<td>City centre</td>
<td>15 minutes (U1)</td>
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<tr>
<td>3</td>
<td>Alpha</td>
<td>City centre - Rathaus</td>
<td>20 minutes (U2 &amp; U1)</td>
<td>2</td>
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<td>Ambassador</td>
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<tr>
<td>4</td>
<td>ARCOTEL Wimberger</td>
<td>City centre - West</td>
<td>25 minutes (U3 &amp; U1)</td>
<td>5</td>
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<tr>
<td>4</td>
<td>Astoria</td>
<td>City centre</td>
<td>15 minutes (U1)</td>
<td>6</td>
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<tr>
<td>5</td>
<td>Bristol</td>
<td>City centre</td>
<td>15 minutes (U1)</td>
<td>7</td>
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<tr>
<td>4</td>
<td>Courtyard by Marriott Wien Messe</td>
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<td>15 minutes (U2 &amp; U1)</td>
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<tr>
<td>NC</td>
<td>De France</td>
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<td>20 minutes (U2 &amp; U1)</td>
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<tr>
<td>4</td>
<td>Der Wilhelmshof</td>
<td>Venue &amp; Messe area</td>
<td>10 minutes (U1)</td>
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<tr>
<td>4</td>
<td>Donauzentrum</td>
<td>Venue</td>
<td>8 minutes (U1)</td>
<td>11</td>
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<td>Europa Wien</td>
<td>City centre</td>
<td>15 minutes (U1)</td>
<td>12</td>
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<tr>
<td>4</td>
<td>Falkensteiner Hotel Am Schottenfeld</td>
<td>City centre - West</td>
<td>30 minutes (U3 or U2 &amp; U1)</td>
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<tr>
<td>NC</td>
<td>Fleming’s Deluxe Hotel Wien City</td>
<td>City centre - Rathaus</td>
<td>20 minutes (U2 &amp; U1)</td>
<td>14</td>
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<tr>
<td>4</td>
<td>Fleming’s Hotel Wien Westbahnhof</td>
<td>City centre - West</td>
<td>25 minutes (U3 &amp; U1)</td>
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<tr>
<td>4</td>
<td>Graben Hotel</td>
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<td>Grand Hotel</td>
<td>City centre</td>
<td>15 minutes (U1)</td>
<td>17</td>
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<tr>
<td>NC</td>
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<td>City centre - Stadtpark</td>
<td>20 minutes (U4 &amp; U1)</td>
<td>18</td>
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<td>4</td>
<td>Hilton Vienna Danube Waterfront</td>
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<td>15 minutes (U2 &amp; U1)</td>
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<tr>
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<td>Hilton Vienna Plaza</td>
<td>City centre - Rathaus</td>
<td>20 minutes (U2 &amp; U1)</td>
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<tr>
<td>4</td>
<td>Hotel Am Konzerthaus</td>
<td>City centre - Stadtpark</td>
<td>25 minutes (U4 &amp; U1)</td>
<td>21</td>
</tr>
<tr>
<td>NC</td>
<td>Ibis Styles Wien City</td>
<td>City centre - Rathaus</td>
<td>40 minutes (U6, U4 &amp; U1)</td>
<td>22</td>
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<tr>
<td>3</td>
<td>Ibis Wien City</td>
<td>City centre - South-west</td>
<td>30 minutes (U4 &amp; U1)</td>
<td>23</td>
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<tr>
<td>3</td>
<td>Ibis Wien Mariahilf</td>
<td>City centre - West</td>
<td>35 minutes (U3 &amp; U1)</td>
<td>24</td>
</tr>
<tr>
<td>3</td>
<td>Ibis Wien Messe</td>
<td>Venue &amp; Messe area</td>
<td>10 minutes (U1)</td>
<td>25</td>
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<tr>
<td>NC</td>
<td>Imperial Riding School Renaissance</td>
<td>City centre - Belvedere</td>
<td>30 minutes (S-Bahn &amp; U1)</td>
<td>26</td>
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<td>InterCityHotel Wien</td>
<td>City centre - West</td>
<td>25 minutes (U3 &amp; U1)</td>
<td>27</td>
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<tr>
<td>NC</td>
<td>InterContinental</td>
<td>City centre - Stadtpark</td>
<td>20 minutes (U4 &amp; U1)</td>
<td>28</td>
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<tr>
<td>4</td>
<td>Johan Strauss</td>
<td>City centre</td>
<td>15 minutes (U1)</td>
<td>29</td>
</tr>
<tr>
<td>4</td>
<td>Kummer</td>
<td>City centre - West</td>
<td>20 minutes (U3 &amp; U1)</td>
<td>30</td>
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<tr>
<td>5</td>
<td>Le Meridien Vienna</td>
<td>City centre</td>
<td>15 minutes (U1)</td>
<td>31</td>
</tr>
<tr>
<td>4</td>
<td>Lindner Hotel Am Belvedere</td>
<td>City centre - Belvedere</td>
<td>30 minutes (S-Bahn &amp; U1)</td>
<td>32</td>
</tr>
<tr>
<td>NC</td>
<td>Meliá Vienna</td>
<td>Venue</td>
<td>3 minutes walking distance</td>
<td>33</td>
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<tr>
<td>4</td>
<td>Mercure Grand Hotel Biedermeier</td>
<td>City centre - Stadtpark</td>
<td>30 minutes (U3 &amp; U1)</td>
<td>34</td>
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<tr>
<td>4</td>
<td>Mercure Secession Wien</td>
<td>City centre</td>
<td>15 minutes (U1)</td>
<td>35</td>
</tr>
<tr>
<td>4</td>
<td>Mercure Wien City</td>
<td>City centre</td>
<td>15 minutes (U1)</td>
<td>36</td>
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<td>4</td>
<td>Mercure Wien Josefshof</td>
<td>City centre - Rathaus</td>
<td>20 minutes (U2 &amp; U1)</td>
<td>37</td>
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<tr>
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<td>Mercure Wien Westbahnhof</td>
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<td>25 minutes (U3 &amp; U1)</td>
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<td>Mercure Wien Zentrum</td>
<td>City centre</td>
<td>15 minutes (U1)</td>
<td>39</td>
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<tr>
<td>NC</td>
<td>Motel One Wien-Prater</td>
<td>Venue &amp; Messe area</td>
<td>15 minutes (U2 &amp; U1)</td>
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<td>NH Danube City</td>
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<td>41</td>
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<td>Novotel Wien City</td>
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<tr>
<td>5</td>
<td>Palais Hansen Kempinski</td>
<td>City centre - Rathaus</td>
<td>20 minutes (U2 &amp; U1)</td>
<td>43</td>
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<tr>
<td>5</td>
<td>Park Inn by Radisson Uno City</td>
<td>Venue</td>
<td>10 minutes walking distance</td>
<td>44</td>
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<tr>
<td>NC</td>
<td>pentahotel Vienna</td>
<td>City centre - South-west</td>
<td>30 minutes (U4 &amp; U1)</td>
<td>45</td>
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<tr>
<td>5</td>
<td>Radisson BLU Style</td>
<td>City centre</td>
<td>20 minutes (U3 &amp; U1)</td>
<td>46</td>
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<tr>
<td>4</td>
<td>Rathauspark</td>
<td>City centre - Rathaus</td>
<td>20 minutes (U2 &amp; U1)</td>
<td>47</td>
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<td>4</td>
<td>Regina</td>
<td>City centre - Rathaus</td>
<td>20 minutes (U2 &amp; U1)</td>
<td>48</td>
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<tr>
<td>5</td>
<td>Ring Hotel</td>
<td>City centre</td>
<td>15 minutes (U1)</td>
<td>49</td>
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<tr>
<td>4</td>
<td>Royal Hotel</td>
<td>City centre</td>
<td>15 minutes (U1)</td>
<td>50</td>
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<td>4</td>
<td>Savoyen</td>
<td>City centre - Belvedere</td>
<td>30 minutes (S-Bahn &amp; U1)</td>
<td>51</td>
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<tr>
<td>5</td>
<td>Sofitel Vienna Stephansdom</td>
<td>City centre</td>
<td>15 minutes (U1)</td>
<td>52</td>
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<td>5</td>
<td>Steigenberger Hotel Herrenhof</td>
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<td>20 minutes (U3 &amp; U1)</td>
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<tr>
<td>5</td>
<td>Vienna Marriott Hotel</td>
<td>City centre - Stadtpark</td>
<td>25 minutes (U4 &amp; U1)</td>
<td>54</td>
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<tr>
<td>4</td>
<td>Wandl</td>
<td>City centre</td>
<td>15 minutes (U1)</td>
<td>55</td>
</tr>
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</table>
Important deadlines

ABSTRACTS

Abstract submission: January 15, 2016
Travel grant application: January 15, 2016
LBCT abstract submission: March 14, 2016
Notification of abstract acceptance/rejection: March 23, 2016

REGISTRATIONS

Early: February 24, 2016
Blank - Booking and prepayment: February 24, 2016
Late: April 27, 2016
Blank - Name list: May 4, 2016
Onsite: from April 28, 2016
Next ERA-EDTA Congresses
**ERA-EDTA for You**

**9** Close collaboration between ERA-EDTA and “The Lancet” and “The Lancet Diabetes & Endocrinology”. Issues of both journals were devoted to kidney diseases and were published in conjunction with the ERA-EDTA Congresses in Amsterdam (2014) and London (2015). Two sessions have been organised jointly both at the 2014 and 2015 meetings. The collaboration has been confirmed for 2016 with a special renal issue scheduled for May 2016 and two symposia at the ERA-EDTA Congress in Vienna.

**10** The ERA-EDTA initiatives for young nephrologists include a number of grants of various kinds: Travel Grants to present free communications or posters at the annual congress, Travel Grants to attend CME Courses, further grants assigned through the National Societies of Nephrology based in European countries.

**11** All ERA-EDTA members who are younger than 40 years of age can become part of the Young Nephrologists’ Platform (YNP). This new initiative will allow young members to actively participate in the scientific life of the Society.

**12** ERA-EDTA has created an educational online journal – NDT-Educational – which is one of the most successful in the nephrological world, with over 100,000 downloads per year. Literature Review is another feature that NDT-Educational offers to its registered users. Experts select and comment the most interesting recent articles related to the various nephrology fields.

**13** ERA-EDTA cooperates with other major Societies of Nephrology and other medical specialties: special ERA-EDTA sessions are organized at the ASN, ISN, ESPN, ESC, etc.

**14** ERA-EDTA has created specific Working Groups to encourage research, communication of knowledge, teaching and to participate in education programmes.

**15** ERA-EDTA gives more than 1,300 free online subscriptions to NDT and CKJ to developing countries all over the world through the HINARI programme; furthermore members living in developing countries all over the world pay an extremely low annual membership fee.

www.era-edtga.org
Living with kidney disease in Austria means that

The chances for early identification of CKD and timely intervention to stop progression are increasing. The Austrian Society of Nephrology has launched the “60/20 initiative”, which implies that measurement of eGFR and testing for albuminuria will be offered to all individuals at risk for CKD and be included in routine health examinations. The program will ensure that every patient diagnosed with an eGFR below 60 ml/min/1.73 m² and CKD will receive diagnostic work-up and appropriate management and, if indicated, will be seen by a nephrologist.

Every suitable patient has a good chance of receiving a kidney allograft in due time. In 2014, a total of 446 renal transplantations (53 per million population) were performed, an all-time high. More than half of the 9000 Austrians on renal replacement therapy live with a functioning renal allograft.

Every patient with an eGFR below 20 ml/min/1.73 m² will be taken care of in a specialised nephrology unit in order to ensure optimal preparation for renal replacement therapy. The Austrian Society of Nephrology has developed standardised material to ensure uniform patient information and to enable a shared decision between patients and doctors on treatment modality selection.

The Austrian Society of Nephrology (ÖGN) represents 270 nephrologists and 79 facilities specialised in the management of patients suffering from all acute and chronic kidney diseases. Our Society’s primary intention is to ensure that every patient has access to all modern and up-to-date diagnostic and therapeutic options in nephrological care. This requires increased public awareness of kidney diseases and specifically amongst policy makers in order to generate financial and staff resources for diagnostic and therapeutic facilities and research. To achieve this goal, continuous education is required in all aspects of our field for our members, students, trainees and all other health care professionals involved in the management of patients with kidney disease. The ÖGN supports and appreciates the scientific efforts and activity of its members, which is also reflected by the active participation of speakers from our society at the forthcoming 53rd ERA-EDTA congress in Vienna. The Society is particularly proud of its Austrian Dialysis and Transplant Registry (ÖDTR), which has collected data of all Austrian patients entering renal replacement therapy from 1965. The voluntary registry provides an invaluable source of data for epidemiological research and clinical quality improvement.

The ÖGN cordially invites you to attend the forthcoming 53rd ERA-EDTA congress in Vienna. Enjoy not only an outstanding scientific program but also the beauty and culture of Vienna and Austria.

ÖGN website: www.niere-hochdruck.at
Contact: oegn@vlkh.net
Registry website: www.nephro.at
The chances for early identification of CKD and timely intervention to stop progression are increasing. Every suitable patient has a good chance of receiving treatment modality selection. A shared decision between patients and doctors on treatment options in nephrological care is required. This requires increased modern and up-to-date diagnostic and therapeutic means that will ensure uniform patient information and to enable professionals involved in the management of patients with kidney disease. The ÖGN supports and appreciates the scientific efforts and activity of its members, which is also reflected by the active participation of speakers from our society at the forthcoming 53rd ERA-EDTA congress in Vienna. The Society is particularly proud of its Austrian Dialysis and Transplant Registry (ÖDTR), which has collected data of all Austrian patients entering renal replacement therapy from 1965. The voluntary registry provides the scientific community with a useful database which has been used in the past for publication of scientific articles. The registry is a mean to ensure that every patient has access to all treatments available in Austria.

The ÖGN cordially invites you to attend the forthcoming 53rd ERA-EDTA congress in Vienna. The conference will also mark the 50th anniversary of the founding of the European Renal Association-European Dialysis and Transplant Association (ERA-EDTA).

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- Active participation in the decision making policies of the Association.

- Special discounted registration fees at the annual Congress.

- Special discounts (35%!) on the purchase fees of Oxford University Press (OUP) books.

- Special discount on Oxford’s English language editing service (OLE).

- Unlimited access to ERA-EDTA Congress E-materials, to all ERA-EDTA members who participate to the Congress.

- Exclusive free access to EuroPD videos!

- Special discounted membership fees
53rd Congress
ERA-EDTA
Vienna
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May 21-24, 2016

www.era-edta2016.org