2019 ANNUAL REPORT







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About IPNA

The International Pediatric Nephrology Association (IPNA) is a global, 501(c)3 nonprofit charitable organization, which believes that all children deserve to be healthy and receive optimal treatment and care for kidney disease regardless of their economic position or political choice. IPNA facilitates the exchange of knowledge and expertise without barriers, does not discriminate and is committed to international understanding. Through our programs, IPNA works to disseminate knowledge about kidney disease in children in the areas where care is needed most. IPNA is the ONLY organization in the world today providing these services for children with kidney disease.

We teach and train through fellowships, teaching courses, junior classes and more. When one IPNA doctor trains 100 doctors in a developing country, thousands of children subsequently receive improved care, and lives are saved. While the impact of our programs leads to positive outcomes for many, the value of having access to just one IPNAtrained doctor is absolutely immeasurable to a family who is desperately trying to save their child's life.









1660

members in 2019

1828

participants at IPNA Congress 31

Teaching
Courses
conducted
around the
world

32

new fellows approved to start their training

IPNA Council

The IPNA Executive Committee consists of nine members – IPNA President, President-Elect, Treasurer and six regional associations' secretaries.

The committee met at the annual Council meeting in Lyon, France in April.



IPNA Council Page: Executive Committee at the annual spring meeting in Lyon.

The annual meeting of the entire IPNA Council took place in Venice during the IPNA Congress. The composition of the Council was partly changed with several new members joining the Council, while the terms of some councilors were completed. The Congress was also a unique venue for the Council to present our latest updates to IPNA members and other congress attendees during the General Assembly.



IPNA Council at large at the annual meeting during the IPNA Congress in Venice.

President

Hui Kim Yap, Singapore

President-Past

Pierre Cochat, France

Treasurer

Bradley Warady, USA

Regional Secretaries

Hesham Safouh, AFPNA Melvin Bonilla Félix, ALANEPE Fiona Mackie, ANZPNA Patrick Brophy, ASPN Arvind Bagga, AsPNA Rezan Topaloglu, ESPN Kenji Ishikura, JSPN

Councilors

Khalid Al Hasan, Saudi Arabia Adonis-Koffy Laurence, Ivory Coast Hari Pankaj, India Michel Baum*, USA Ali Duzova, Turkey Olivia Boyer, France Bashir Admani, Kenya Francisco Cano, Chile Susan Furth, USA Francesco Emma, Italy Mary Leonard, USA Alfonso Huante, Mexico Il-Soo Ha, Korea Dieter Haffner*, Germany Nilzete Bresolin, Brazil Florencio McArthy, Panama John Mahan, USA Ruth McDonald, USA Jaime Restrepo, Colombia Giovanni Montini, Italy Koichi Nakanishi, Japan Donald Lee Batisky, USA Maury Pinsk, Canada Lesley Rees*, UK Sampson Antwi, Ghana Franz Schaefer*, Germany Elena Levtchenko, Belgium Johan Vande Walle, Belgium Hong Xu, China Lim Yam-Ngo, Malaysia

For most of us, Pediatric Nephrology is really a passion.

*Ex-Officio

Hui Kim YapIPNA President



Hui Kim Yap, New IPNA President

The IPNA Congress in Venice was not only a fabulous meeting with an excellent scientific program, but it also served as the occasion for Pierre Cochat to hand over his IPNA Presidency to Prof. Hui Kim Yap from Singapore.

I must confess I have spent 6 wonderful years with you all, and I am glad to have been able to achieve all of the goals written in my intention letter.

The most important is under our logo: Great care for little kidneys. Everywhere.

Pierre Cochat former IPNA President

IPNA Strategic Plan

Completion of the present strategic planning process will enable us to articulate both a vision and path whereby the relevance and value of IPNA can be sustained for the future.

Joseph Flynn, former IPNA Councilor and Chair of the Strategic Planning Initiative



Joseph Flynn



IPNA Strategic Plan is focused on 4 key areas (in graph):

Strengthen IPNA's infrastructure...

Enhance
the capacity
of providers to care
for children with
kidney disease

Expand and diversify funding to support IPNA initiatives

Increase
engagement
of the Pediatric
Nephrology
community

The full IPNA Strategic Plan is available online to members after logging into the IPNA Website.

Susan L. Furth recently joined the IPNA Council and will be carrying forward the strategic planning process previously led by Joseph Flynn.



Susan L. Furth

Susan has relevant experience from her involvement in strategic planning as a Council member of the American Society of Pediatric Nephrology and as Past President of the Society for Pediatric Research. She is Vice Chair of the Department of Pediatrics at the Perelman School of Medicine at the University of Pennsylvania and Chief of Nephrology at the Children's Hospital of Philadelphia.

Membership Overview

Increasing membership
is a major goal
of IPNA so that the best care
possible can be provided
to children with kidney
disease all over the world.

In order to reach this goal, IPNA and all regional societies (AfPNA, ALANEPE, ANZNPA, ASPN, ASPNA, ESPN, JSPN) have made available a combined membership developed to support local resources and provide several benefits.

Membership data

Month / year	2016	2018	2019
January	1225	890	1220
June	1514	1296	1485
September	1565	1394	1660

Total number of members up to December 31st 2019: 1660



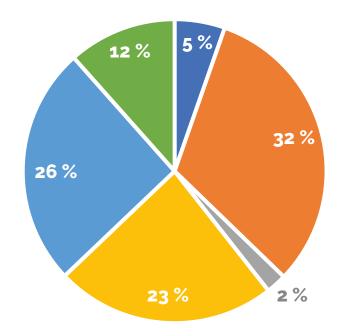
IPNA Members Per Continent



Australia

EuropaNorth America

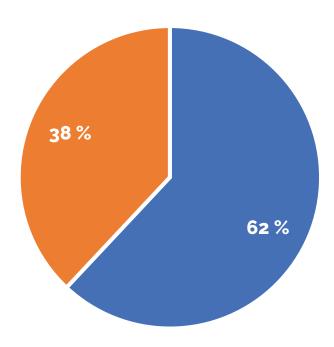
■ South and Central America



IPNA Renewals x New Members

Renewed

New Members

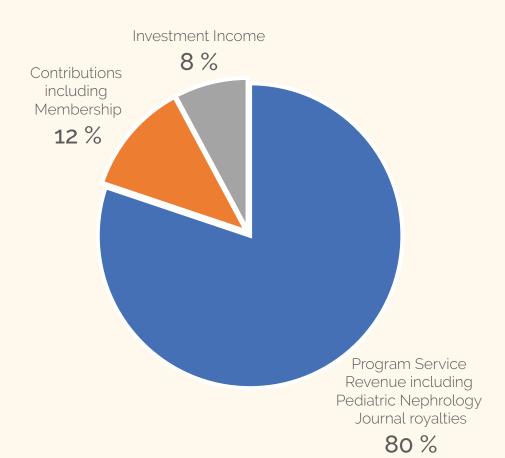


IPNA Financial Summary



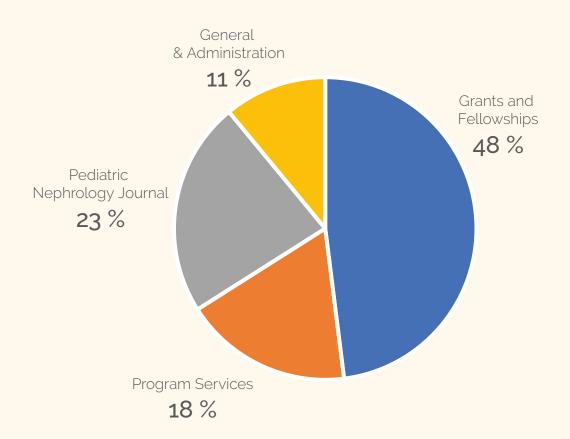
Brad Warady, IPNA Treasurer

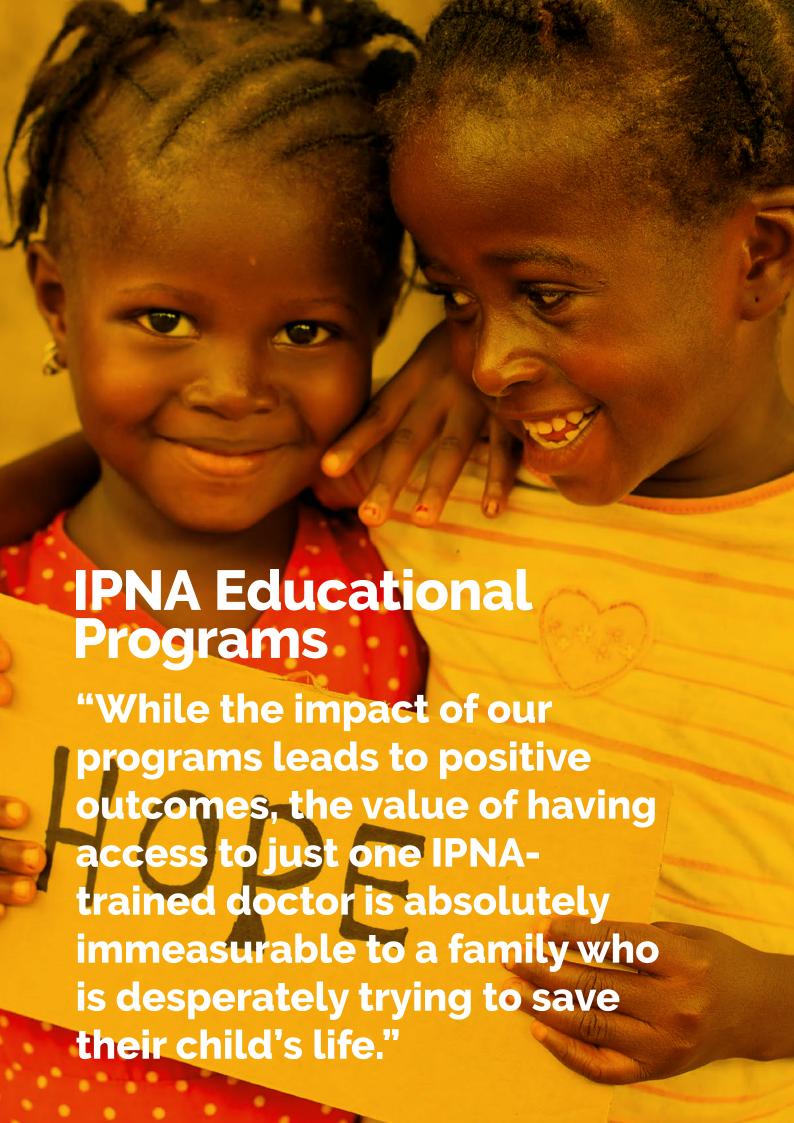
IPNA Financial Review 2019 – Income \$1,076,588 USD



IPNA is a global non profit charitable organization registered in the United States. The following slides provide an overview of IPNA's 2019 income and expenses. Most of the income comes from Journal royalties with expenses targeting the mission of IPNA supporting the education and training of pediatric healthcare providers in developing countries. By law, IPNA files an annual US tax return reporting on all income and expenses.

IPNA Financial Review 2019 – Expenses \$997,377 USD





IPNA Teaching Courses

IPNA Teaching Courses are a core educational activity of the society with the highest reach when it comes to the number of participants.

In 2019, up to 4,000 attendees participated in IPNA Teaching Courses conducted all over the world (see the list of the countries).

Our main goals for 2020 and 2021 are to increase the number of Teaching Courses specifically in the developing regions, such as countries in Africa and Asia, and develop useful methods to allocate our financial resources throughout a world with an ever increasing need for more pediatric nephrology education.

It is crucial for us to have feedback from the courses to help us build an intentional strategy that accomplishes our goals and ensures that we allocate our financial sources effectively. Thus in 2019, we developed an online IPNA TC Final Report (based on previous final report formats) that TC directors are required to file with the IPNA Office within 3 months of TC completion.

We have also been working on a new scoring criteria system for applications that puts more priority on the number of attendees for each proposed TC and the relative income status of the host country. This will be tested in 2020 as a method to define how we decide to allocate precious funds and approve TC in the future.



John Mahan,
IPNA Professional
Education
Committee Chair

The Teaching Courses Committee and Junior Masters Class Committee were merged at the IPNA Council Meeting in Venice into a newly formed Professional Education Committee, that is also an umbrella for all IPNA Professional educational activities including IPNA Webinars, the triennial IPNA Congresses and other IPNA educational initiatives.



UP TO 4000 PARTICIPANTS

including Peds Neph, Pediatricians, Gen Physicians and Peds Neph Fellows attended the courses in 2019.



UP TO 31 COURSES

IN TOTAL

teaching courses took place all around the world in 2019 with 52 % in Asia, 19 % in South America and 16 % in Africa.



\$163,843 BUDGET

in total was provided to organizers to cover the expenditures of the courses. Thank you for everything! IPNA teaching course Valdivia-Chile was a successful event with excellent academic content and warm hospitality.

Dr. Lilian Villalba participant of the Teaching course in Chile.



List of Countries with IPNA Teaching Course in 2019:

Russia

Nigeria

Argentina

India

Jordan

USA

Lebanon

Ecuador

Morocco

Chile

Madagascar

Ukraine

Serbia

China

Tunisia

Philippines

Colombia

Brazil

Belize

Bhutan

Mongolia

Kenya



IPNA teaching course in Quibdó, Colombia with more than 40 attendees.



The first IPNA teaching course in Bhutan: Keen group of doctors, a lot of lectures and practical hands-on PD and Vascular access teaching. Prof. Hui Kim Yap, Prof. Arvind Bagga, and Prof. Mignon McCulloch were among the speakers.



IPNA Fellowship Program

This important IPNA program designed to bring nephrology care to regions, where it is limited or non-existent, provides the fellow professional/hands on training in pediatric nephrology at IPNA training centers around the world.

32 fellows were approved for training in 2019. The majority of them come from developing countries in Asia and Africa.

Successful candidates in Fellowship Program 2019: Region of Origin

10 Africa 17 Asia

1Central
America

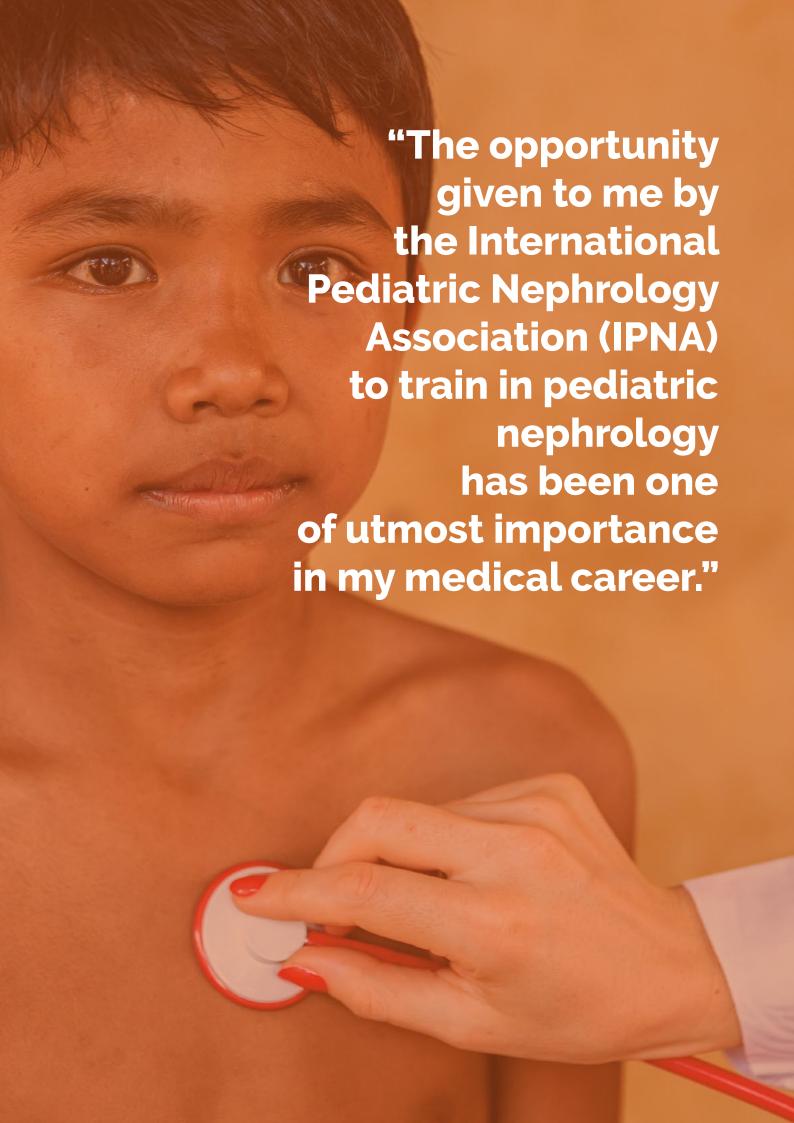
4 Europe

12

new centers have become recognized IPNA training centers in 2019. New IPNA Training Centers per region: Africa: 6;

Europe: 4; North America: 1; Latin America: 1 38

a total of 38 training centers around the world



Thank you so much for accepting my application for the IPNA fellowship program. I am pretty sure that combining my current experience with your training program will allow me to reach the top level of my Career.

Dr Win Min Naung

Successful fellow candidate in 2019

I strongly recommend that the IPNA fellowship be maintained as it offers an unparalleled and invaluable opportunity to achieving essential clinical skills not limited to pediatric nephrology, but also non-clinical opportunities internationally.



Rasaki Aliou

Children Hospital Cairo, Egypt

The opportunity given to me by the International Pediatric Nephrology Association (IPNA) to train in pediatric nephrology has been one of utmost importance in my medical career. My training has lasted nearly 2 years, commencing on the 1st of August 2017. The exposure through this training has been remarkably excellent. The support, teaching and supervision of my consultants has been amazing; not only in academic or professional engagements but social engagements as well. The success of my training would have not been possible without the inputs from nurses, dialysis technicians, Urodynamic technician and other health staff. I have been able to meet my prior set objectives and additionally acquired other skills that were not originally part of my envisioned target goals.

Beatrice Nyann

Red Cross War Memorial Children's Hospital, Cape Town, South Africa

The training at the Children's Kidney Centre, National University Hospital, has introduced to me the value of teamwork with mutual respect, understanding and co-operation between various team members including doctors, nurses, technical and support staff. It has boosted my confidence and given me a purpose to utilize my skills for the benefit of a large number of children who suffer from renal disorders. I feel privileged to have been a part of the National University Hospital.

Archana Pinapala

NUH Singapore





Amar Mohammed finished her fellowship training at St. Johns Medical College Hospital, Bangalore, India, in September 2019.



More than 230 fellows
have been trained under
the IPNA fellowship
program. Big thanks
goes to the Fellowship
Committee chairs –
Brad Warady (on the
left) and Paulo KochNogueira. Francisco Cano
(on the right) is the new
committee chair named
at the Congress in Venice.



Interview with Dr. Chris Esezobor

Former IPNA Fellow

Department of Paediatrics, College of Medicine, University of Lagos



Dr. Esezobor with some of the paediatric nurses.

"Though I was dreaming of a life as an infectious disease specialist, this acute need for someone with the knowledge and skill to care for little kidneys was strong enough to sway me."

What made you consider a career in medicine; specifically in pediatric nephrology?

Growing up, if you were good in science, technology and mathematics, all of your teachers nudged you to read medicine. My first love was engineering, but with no teacher in higher mathematics, I thought my chances

of passing the entrance exams in Engineering was reduced, so I opted for medicine in my matric examinations. The rest they say is history.

My choice of paediatric nephrology was driven by an obvious and dire need for paediatric nephrology services in my training centre and in Lagos. While I was still a junior registrar, the only paediatric nephrologist in my centre, and by extension, Lagos State, took a leave of absence and thereafter resigned her position in my hospital and left the country. With that turn of events, dismal outcomes befell every child with renal

failure that was admitted into my hospital for dialysis. For example, over 30 children with AKI secondary to ingestion of diethylene glycol in a brand of paracetamol died in Lagos in 2008 without getting any form of dialysis. So, though I was dreaming of a life as an infectious disease specialist, this acute need for someone with the knowledge and skill to care for little kidneys was strong enough to sway me. It was that strong that I forfeited any form of income to come to Cape Town to complete a fellowship in paediatric nephrology, thanks to IPNA.

What was the biggest challenge for you during your early days as a student?

Secondary and Tertiary
Education: Poverty.
The money for the entrance
exam into secondary school
was borrowed by the family;
a church member provided
the money for matric exam
into the university. However,
being top of the class
at every level in the university provided some relief
such as access to hostel
accommodation.

Postgraduate education: There was no trainer in paediatric nephrology during most of my time as a resident doctor. During the period of fellowship, institutional support was meagre: I had to 'resign' my position in the university and pay back the 3 months' salary I had received before I could come down to Cape Town for the IPNA fellowship. I am grateful for the support of my wife who provided for the home during this period.

What are the biggest changes/where can you see the main progress compared to kidney care 3-5 years ago?

For my centre: AKI is now more readily recognised; there are many fewer deaths from AKI especially in my centre mostly from adept management of common fluid and electrolyte disturbances and renal replacement therapy. There is a marked reduction in mortality in children with PUV; I did this by assuming care and hospitalisation responsibility for every child with PUV in my hospital. Only when the child is stabilised do they go for ablation, and after the ablation, we provide follow up care. Children with nephrotic syndrome now receive care that is comparable in terms of quality (except where cost is a problem) to other centres in the world.

What are the main points you have learned so far from frontline care with families that you would like to share with young doctors?

Families of children with kidney conditions navigate through a lot of challenges to access care. Doctors should make the process a bit easier for them. For instance, because I know that very few doctors are comfortable managing kidney diseases especially in children, all parents of children with chronic kidney disease in my care have my cell number written in a book for them (if your hospital is organised well

enough to have an official line they can call, that would certainly be the best option). A second point is patient education: you must learn to talk, talk and talk with the parents and children. Keeping a database of your practice is another important lesson I have learned. If you don't document what you are doing in terms of academic publications, it is difficult for anyone to believe what you say you are doing. Documentation also brings a level of self-awareness to your practice and people will only help you if they know what you are doing.

In 2019 you successfully set up a PN unit as an IPNA training center. What are your future plans in Lagos and Nigeria generally?

I would like to get more residents and paediatricians interested and trained in paediatric nephrology and forge a sister renal centre relationship with a developed centre. I would like to provide dialysis services (both hemo and PD) for all ages in a sustainable manner and run teaching courses in paediatric nephrology. I would also like to develop parent/patient educational materials on common kidney diseases in some of Nigerian major languages (Yoruba, Ibo and Hausa).

We are very privileged at Red Cross War Memorial Children's Hospital to have IPNA funded fellows who join us not only to learn but also to teach us. Chris joined us in 2010 and really impressed us with his bright inquiring mind, passion for knowledge to take back to his patients and lovely warm personality. He integrated quickly into our team and made the most of his training time in Cape Town. On return to his home institution, he implemented all that he learnt during his training fellowship and has also gone on to make this specifically relevant to his own institution.

Despite a busy workload, he has also managed to pursue an academic interest and publish significant papers with an African interest.

He has continued close communication with our team in Cape Town and has gone on to become a leader in his own region, as well as within the African Paediatric Nephrology Association, being responsible for the website as well as secretarial support. Chris has grown his own department and been involved in teaching to the point that he now has become one of the first IPNA fellows to develop a level 1 IPNA Training centre in Lagos – so Trainee becomes Trainer!

We would also like to thank IPNA for their fellowship funding and and wish Chris all the best as he continues in his career and caring for children with kidney diseases in his center and surrounding region... Continuing Great Care for Little Kidneys... Everywhere.

Prof Mignon McCulloch

Head of Clinical Unit: Renal and Organ Transplant Red Cross War Memorial Children's Hospital, University of Cape Town





IPNA Master for Junior Classes in New Delhi.

IPNA Junior Master Classes

The IPNA council previously developed an educational program involving junior Pediatric Nephrologists as one of the activities of the IPNA Juniors Committee chaired by Prof. Rezan Topaloglu. It was decided to enable this as an IPNA sanctioned joint activity with the regional societies.

In 2019 there were two Junior Master Classes that took place in Venice and New Delhi.

The ESPN-IPNA Master for Junior Classes was held before the IPNA Congress in Italy. There were 110 participants in total from 35 countries. The scientific program consisted of 20 lectures on: Hypertension, Acute Kidney Injury, Chronic Kidney Disease, Peritoneal dialysis, Hemodialysis, Transplantation, 2 Interactive Clinico-Pathology sessions and 1 UptoDate lecture – Cystinosis.

Lectures were given by both IPNA and ESPN speakers. The course was accredited by UEMS-CME with 14 credits

The AsPNA-IPNA Master for Junior Classes was attended by 110 participants on April 6–7, 2019 New Delhi, India.



IPNA Master for Junior Classes in Venice.

The focus of this course was on Tubular Diseases and Electrolytes. Lectures were given by local and IPNA speakers.

Under a reformatted approach, the Junior Master Classes now fall under the newly formed Professional Education Committee, which was proposed at the IPNA Council Meeting in Venice.

World Kidney Day and Sister Center Program



In 2019 we continued with our World Kidney Day Contest to encourage education and screening in children with kidney diseases. This contest allows IPNA to provide 5,000 USD to the winning pediatric nephrology center from a developing country.

The winner of the WKD 2019 IPNA initiative is Dr. Alfonso Huante from Mexico.

Aim of the winning project:

To increase the awareness of kidney disease by:

- 1 Using strategies for early detection of kidney disease among general physicians and/or pediatricians and providing knowledge to people to empower them together for improving kidney disease networking
- 2 Increasing interest in pediatric residents and medical students to get them involved in pediatric nephrology as a medical career in clinical and research fields.



Linking developing pediatric renal units (emerging center) in less resourced regions of the world to experienced pediatric renal units (supporting center) in well resourced regions is essential for improving the conditions in less developed centers. 2019 is the second year of our Sister Center Program. The first project continues with various joint activities and the second project was selected from the multiple received applications after careful consideration.



Dr. Melvin Bonilla visiting the emerging center in Guatemala.



Dr. Melvin Bonilla (on the right) from the supporting center in Puerto Rico and Dr. Randall Lou-Meda from the emerging center in Guatemala.

The second selected project of Sister Center Program is the collaboration between the National Hospital in Abuja, Nigeria and Charlotte Maxeke Johannesburg Academic Hospital, South Africa.

By the end of the year we were also pleased to announce big progress in cooperation with ISN: Recipients of the IPNA Sister Renal Centre Program are able to competitively apply to the ISN Sister Renal Center Program at Level B, and subsequently, if successful, Level A after completion of the IPNA program.

Joint Projects

"This year, two KCN sites (Nepal and Bolivia) have made a special point to expand their training and capacity building efforts to pediatric sites in the region."



Saving Young Lives

The Saving Young Lives Program (SYL) aims to develop sustainable peritoneal dialysis (PD) programs to treat patients with Acute Kidney Injury (AKI) in low resource settings.

From its inception in 2012, the plan has been to provide basic support in terms of supplies procurement, education and training of physicians and nurses and funding for supplies to start PD programs for patients with AKI needing renal replacement therapy with the goal of the programs becoming fiscally sustainable after 2 to 3 years.

The project is self-financed through an agreement of the four international societies: ISN, IPNA, ISPD and EuroPD.

Workshops in 2019:

- Aug 3-4: New Delhi, India Paediatric Critical care and Nephrology Course with a component of SYL attached
- Aug 7-9: Thimpu, Bhutan IPNA teaching course with SYL component
- Sept 25–28: Mombasa, Kenya AFPNA/AFRAN Congress with SYL component
- Nov 15–16: Bangalore, India SYL Renal Basic Life Support Training

A total of 264 doctors and nurses have been trained under the SYL Project.



oby25 / Kidney Care Network

"Through IPNA's support, the Kidney Care Network (KCN) project is well on its way to advancing its aim to develop a strong responsive Kidney Care Network, starting with 4 units that have become training centers for integrated kidney care in their countries. Local advocacy efforts are being made in parallel to ensure the KCN's efforts are sustained in the long term. This year, two KCN sites (Nepal and Bolivia) have made a special point to expand their training and capacity building efforts to pediatric sites in the region, and data collection has begun on pediatric cases in 2019 to demonstrate the impact these efforts have.

The ongoing success of the Kidney Care Network is in part due to IPNA's generous contributions to the project and the oby25 Initiative.

IPNA's support of this project brings us one step – or leap! – closer to our aspirational goal of 0 preventable deaths in AKI by 2025."

Kelly HendricksISN KCN Project Manager







The 18th IPNA Congress in Venice was a memorable event for many reasons. Firstly, the record for the number of total congress participants was broken, 1,828 in total, of whom 1,702 were congress members and 126 exhibitors' staff. The total number of accepted abstracts was 1,222 with 102 presented as oral communications. Over 300 people attended the wide range of pre-congress courses. More than 110 nations were represented in Venice. While The United States was the best represented country with 152 delegates, closely followed by Italy, The UK, Japan and Brazil, we were also very pleased to welcome many colleagues from low income countries around the world.

The Scientific Program covered a wide range of renal issues; we would like to thank everyone who was involved in its creation, especially Julie Ingelfinger and the Scientific Committee for their active participation. The excellent speakers we were lucky to have from all over the world contributed greatly to the success of the event, and we send our deep gratitude to them as well.

The enjoyable Gala Dinner was hosted in the Venice Arsenale, a location full of historic importance and pivotal in the prosperity of the city over the centuries due to its shipbuilding activity. We sincerely thank you all for your attendance and support and for making the experience unforgettable for us all. We would like to wish Calgary all the best for the 19th IPNA congress in 2022.

Giovanni Montini Alberto Edefonti Francesco Emma

18th IPNA Congress October 17–21, 2019 Venice, Italy

1828

Total participants

1281

Total number of submitted
Abstracts

1222

Total number of Accepted Abstracts

102

Total number of Oral
Communication

112

Total number of represented countries

Top 10 countries by participants:

USA, Italy, UK, Japan, Brazil, India, France, Germany, Turkey, Belgium



Ira Greifer

Otto Mehls (Germany)

The award recognizes individuals who exemplify IPNA's mission and goals, have demonstrated local and/or national leadership to that end, and have made significant contributions to IPNA.



IPNA Awards

Awards 2019 were given to the following awardees:

Lifetime AchievementRamon Exeni (Argentina)

The award recognizes individuals who have dedicated their life to the development and improvement of Pediatric Nephrology care in areas where there is a particular with demonstrable advancement in care.

The IPNA Awards Ceremony takes place every three years during the IPNA Congress. We received excellent nominations from around the globe for each award and the IPNA Awards Committee had a tough task to select the awardees in the summer months before the congress.



Renée HabibOlivia Boyer (France)

The award recognizes young investigators with an outstanding record of achievement and creativity in basic or patient-oriented research related to the functions and diseases of the pediatric kidney.

Educational Award Arvind Bagga (India)

The award recognizes individuals for their considerable educational contribution to IPNA.



In addition, honorary memberships were provided to these pediatric nephrologists for their outstanding contributions to Pediatric Nephrology:

- Dr. B. R. Nammalwar (India)
- Dr. Ellis Avner (USA)
- · Dr. Chiu Man (China)





Friends of IPNA

The first 'Friend of IPNA' Award was presented in Venice to Mr. Tibor Martinek (Canada) for his support of young pediatric nephrologists from East European countries in obtaining various grants to visit Canadian children hospitals, enrollment in clinical trials, and to attend the Annual Pediatric Nephrology Seminar in Miami.

As a recently recognized Friend
of IPNA, I had the opportunity to observe
IPNA's work-in-progress since 2004 in Adelaide;
the tremendous progress and effort to advance
training under various programs by IPNA,
mainly in developing countries, in countries
of former Soviet Union, etc. I was impressed with
tremendous increase in participation of paediatric
nephrologists from developing countries at IPNA
2019. I vividly recall prof. Matthias Brandis, then
Secretary-General of IPNA, as he was proudly
explaining in Adelaide the goals and mission
to expand the training courses and to increase
the fellowship program for the paediatric
nephrologists. Congratulations!



In 2019, IPNA council
established a new 'Friend
of IPNA' Award to recognize
non-IPNA members sharing
IPNA's mission and goals,
and for their support
of IPNA activities either
financially or with other
means to improve care
of children with kidney
diseases.

Tibor MartinekIPNA Congress in Venice, 2019

IPNA Communication: Website and Social Media

At the IPNA Council Meeting in Venice, Italy, the organization of the Website Committee was rebranded as the Communications Committee, and the role expanded to include the IPNA Newsletter and Social Media functions. All communication functions are supported by C-IN. The Committee met by teleconference in January 2020 to review the terms of reference and designate the leadership roles within the structure. The terms of reference will be reviewed and approved at the Council Executive in April. As part of a new mandate to be more inclusive of the general membership, a call for additional committee members will go out in the spring to assist specifically with the Social Media functions, and reintroducing the IPNA Journal Club.

The work of the Committee over the next year will include the following:

- Work with an external consultant to review the feasibility of merging the littlekidneys.org
 and ipna-online.org websites with multiple functions serving the members of IPNA, donors,
 and the pediatric renal community internationally.
- Review the functionality of the website, and insure the technologies employed support the functions of IPNA, its committees, the membership, and philanthropists.
- Publish six newsletters per year, two of which will have an educational focus, on the progress and achievements of IPNA, its members, and the provision of renal care to children internationally.
- Promote a vital social media presence informing the community at large of IPNA achievements and opportunities.
- Reinstitute the IPNA Journal Club (#IPNAJC) as a robust educational offering from IPNA to its members and the pediatric community at large.

Dr. Maury Pinsk

Chair, IPNA Communications Committee, Website co-Lead, on behalf of the Committee:

Dr. Don Batisky (Vice Chair)

Website co-Lead

Dr. Yam-Ngo Lim, Newsletter Lead

Dr. Michael Malina, Social Media co-Lead

Dr. Dean Wallace. Social Media co-Lead

Dr. Patrick Brophy

Dr. Alfonso Huante



Join IPNA on



IPNA Currents

Through the IPNA Currents newsletter, we aim to facilitate fulfillment of our organizational mission and goals by enhancing information dissemination among the international membership regarding IPNA activities and initiatives.

Opening rate of IPNA Currents Newsletter

1/2019 2/2019 3/2019 4/2019 41,5 % 41,5 % 37,8 % 38,5 %

Development: Marketing & Fundraising Initiative

The IPNA Development program is ongoing with the goal to raise money to expand programs in low resource areas of the world. Funds raised in 2019 were used to provide scholarships and travel for physicians in developing countries to attend the 2019 International Congress in Venice, Italy. Additional funds will be used to support two Teaching Courses scheduled for Southeast Asia in 2020.

Our continued focus is to increase funding for new member sponsorship, teaching courses and fellowships.

www.littlekidneys.org/give-now-and-support-ipna





Journal Pediatric Nephrology

The journal Pediatric Nephrology is edited by Lesley Rees and Michel Baum. The associate editors are Roseanna Coppo, Joseph Flynn, Dieter Haffner, Stephen Marks, Carl Bates, and Detlef Bockenhauer. The journal had a successful year in 2019. There were 705 submissions and 35 % of these manuscripts were accepted for publication. The journal published 11 brief reports, 131 original articles, 33 review articles, and 32 educational reviews. The impact factor was 2.82, which is excellent for a pediatric subspecialty journal.

Michel Baum Lesley Rees

Editors of Pediatric Nephrology



	2016	2017	2018	2019
Impact Factor	2,516	2,627	2,816	Not yet available
Number of Downloads	530,250	625,484	568,665	619,922
Submissions	704	725	706	705
Rejection Rate	66 %	64 %	62 %	65 %
Published Articles	274	296	288	250
Print Copies to Society Members	1,428	602	462	437

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