

Foreword

In May 2007, a symposium for Dutch nephrologists initiated by the Baxter Renal Division, the Netherlands, was held in Berlin. The articles in this supplement represent the contents of the Peritoneal Dialysis (PD) meeting held during this symposium. The aim of the symposium was to facilitate the exchange of knowledge and experience in a low-barrier setting, to improve debate and to explore ways of enhancing the care for end-stage renal disease patients and for those in PD therapy in particular. The subjects that were addressed were related to all aspects of PD therapy: modality choice, outcome, social and economical impact, complications, basic research and future developments. During the 3 days, both national and international speakers gave lectures and held workshops on clinical experiences and scientific issues, which motivated the participants to respond actively with feedback.

Similar to the 2005 PD Initiatives symposium in Madrid, Baxter, the Netherlands, decided to sponsor a NDT supplement with an interesting compilation of dialysis-related articles, not only for the symposium participants but also for other NDT readers.

Clinical experience

The majority of the articles consist of topics that are clinically important. The host of the meeting, Professor Wolfgang Pommer from the Humboldt Klinik in Berlin, Germany, illustrated the importance of diabetes as a cause of nephropathy and end-stage renal failure in Germany. Wide attention was given to the pre-dialysis phase. First, the optimal planning of a dialysis career was discussed. Summarizing a previous article in NDT, the drawbacks of starting dialysis in elderly patients were described. In addition, the importance of a nurse practitioner in the pre-dialysis care was demonstrated. After choosing PD as therapy, the PD modality becomes an important factor in the patient's life. Therefore, the benefits of automated PD, the weaknesses and possible ways to overcome them were described. In an article by a specialized surgeon, implantation techniques and catheter care, together with potential complications, were pointed out. Several ways to monitor a PD patient were listed in a review and the last part of the clin-

ical experiences was about the role of the glucose polymer icodextrin in PD.

Basic research

An important part of the meeting covered basic science. This is demonstrated by the review article focusing on the role of amino acids as a possible nutritional source in automated PD and by the article on the predictive factor of measurable changes in the peritoneal membrane.

As there is a wide interest in the development of new PD solutions and new techniques, attention was given to this subject as well. Also, the use of a new combination of osmotic agents, tested in an animal model, was addressed. In an experimental study in patients with severe ultrafiltration failure, the effect of treatment with glucose-free dialysis solutions was described.

Acknowledgements. We would like to thank all the authors for their contributions to this supplement and hope that this issue of NDT will help to improve the care for end-stage renal disease patients.

Conflict of interest statement. WS is a part-time employee of Baxter Healthcare.

Willi van Kuijk
VieCuri Medisch Centrum voor Noord-Limburg
Venlo, the Netherlands
whmkuijk@viecuri.nl

Yvo Sijpkens
Ziekenhuis Bronovo
Den Haag, the Netherlands
y.w.j.sijpkens@lumc.nl

Elisabeth Boeschoten
Hans Mak Instituut
Naarden, the Netherlands
elsboeschoten@hansmakinstituut.nl

Watske Smit
Academisch Medisch Centrum Amsterdam
the Netherlands and Stichting Dianet
Amsterdam-Utrecht, the Netherlands
Wa.smit@amc.nl