

Special Issue on Kidney Disease in Disadvantaged Populations

Call for Papers

Kidney disease may affect specific populations around the world. Populations at higher risk for kidney disease include individuals of both nonindigenous and indigenous origins. In the North America sub-continent, African Americans, Latinos, Native American Indians, Alaska Natives, Native Hawaiians of the USA, and First Nation Communities of Canada are at higher risk. In the Pacific region, Aborigines of Australia, the Maoris of New Zealand, and the Pacific Islanders also have a predilection for kidney disease.

Studies suggest that peoples from the Indian subcontinent and from Africa as well as those living in economically disadvantaged communities may also be affected. A vulnerable population may be least able to muster either public health, scientific, or clinical resources to address the problems posed by kidney failure. The disadvantage may impact on the detection, clinical course, treatment, or prognosis of kidney disease. Further, kidney disease encompasses the spectrum from acute kidney injury (AKI), glomerulonephritis, chronic kidney disease (CKD), dialysis, and transplantation. Related comorbid conditions may also be important, including the impact of hypertension, maternal factors during pregnancy, diabetes mellitus, cultural issues, and social disparities.

We invite investigators to contribute original research articles, as well as commentaries, clinical case reports, and review articles that will stimulate continuing efforts to understand the epidemiology, risk factors, underlying genetics, and/or clinical and economic aspects of how kidney disease affects disadvantaged populations, as well as the converse, the impact of a disadvantaged setting on the detection, clinical course, and treatment of kidney disease. Potential topics include, but are not limited to:

- The prevalence of kidney disease in disadvantaged populations
- Screening strategies for patients with kidney disease
- The role of government and competing priorities in minority
- Populations and developing nations
- The potential effects of maternal factors on the development of hypertension and kidney disease in disadvantaged populations
- CKD in the urban poor
- Glomerulonephritis in disadvantaged populations

- The economic and social burden of kidney transplantation in disadvantaged populations
- The impact of disadvantage on the progression of kidney disease
- The impact of AKI as a risk factor for CKD in disadvantaged populations
- Global approaches for understanding the disproportionate burden of chronic kidney disease
- Mechanisms for increased prevalence of renal disease (genetic and socioeconomic or other) in disadvantaged populations

Articles published in this special issue will not be subject to the journal's Article Processing Charges.

Before submission authors should carefully read over the journal's Author Guidelines, which are located at <http://www.hindawi.com/journals/ijn/guidelines/>. Prospective authors should submit an electronic copy of their complete manuscript through the journal Manuscript Tracking System at <http://mts.hindawi.com/> according to the following timetable:

Manuscript Due	March 02, 2012
First Round of Reviews	May 25, 2012
Publication Date	July 20, 2012

Lead Guest Editor

Rudolph A. Rodriguez, Department of Medicine, Puget Sound Healthcare System, University of Washington, Seattle, WA, USA; rudy.rodriguez@va.gov

Guest Editors

Li-Li Hsiao, Renal Division, Brigham and Women's Hospital, Boston, MA 02115, USA; lhsiao@partners.org

J. Kevin Tucker, Renal Division, Brigham and Women's Hospital, Boston, MA 02115, USA; jktucker@partners.org

David Pugsley, Renal Unit, the Queen Elizabeth Hospital, SA, Australia; david.pugsley@bigpond.com