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Onconephrology

EDITORIAL COMMENT

Onconephrology abstracts and publication trends: time to collaborate

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Abstract

Onconephrology is an emerging subspecialty of nephrology. The American Society of Nephrology(ASN) created a forum dedicated to the field of onconephrology in 2011 to improve collaborative care for cancer patients with kidney disease. In this article, we review the ASN Kidney Week abstracts that were related to onconephrology. There has been an increase in the number of onconephrology-related abstracts at ASN over last 3 years. But only one-fifth of abstracts that were onconephrology related in ASN were published in peer review journals. *Clinical Kidney Journal (CKJ)* has seen an increase in onconephrology publications in the last 3 years. Most were case reports or review articles. The more widespread use of the keyword 'onconephrology' in all such manuscripts may facilitate the search for onconephrology research papers. To advance the field, *CKJ* has now created an onconephrology subheading for manuscript categorization. We also propose that conference organizers of ASN and other kidney-related society meeting such as International Society of Nephrology abstract category. Randomized controlled trials in a subspecialty like onconephrology can only be possible when there is collaboration amongst nephrologists and cancer physicians from cancer centers around the world that interact and share research ideas at international meetings.

Key words: ASN Kidney Week, chemotherapy toxicity, CKJ, nephrology education, onconephrology

Onconephrology is an emerging subspecialty of nephrology [1]. The American Society of Nephrology (ASN) created a forum dedicated to the field of onconephrology in 2011 to improve collaborative care for cancer patients with kidney disease [2].

Renal diseases in cancer patients have unique features that require an integrated and specialized approach in management. Acute and chronic kidney injury, fluid and electrolyte abnormalities and chemotherapy-related renal toxicities are very common and complex. Nephrologists have become an indispensable part of the multidisciplinary cancer care teams at tertiary cancer care centers to improve cancer outcomes. Given the complexities of this subspecialty, formal additional fellowship training at dedicated cancer care centers should be offered. Research in onconephrology is ongoing in different centers all over the world. Collaborative research would lead to better studies and ultimately help cancer patients with kidney disease. One of the aims of the ASN onconephrology forum was to allow for collaborative research strategies in the field of onconephrology. The types of onconephrology research presented at ASN Kidney Week (ASN-KW) have not been analyzed. The number of onconephrology-related abstracts accepted to be presented at ASN-KW 2012–2014 is unknown.

We reviewed the abstracts presented at ASN-KW over the past 3 years from 2012 to 2014 that were related to onconephrology.

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Fig. 1. Breakdown of abstract topics. AKI, acute kidney injury.



Fig. 2. Breakdown of onconephrology topics in CKJ.

Search terms used to identify abstracts included cancer, myeloma, chemotherapy, tumor lysis, paraneoplastic syndrome and hypercalcemia. They were then categorized into basic science, chemotherapy, myeloma, epidemiology, electrolyte disorders, acute kidney injury, tumor lysis, glomerular diseases, paraneoplastic syndromes and obstructive uropathy. Abstracts were also categorized based on study design.

Figure 1 breaks down the total number (N) of abstracts (y-axis) in the last 3 years presented at ASN-KW by category. There has been an increase in the number of onconephrology abstracts over the last 3 years. A total of 175 abstracts were reviewed. In 2012 there were 50 onconephrology-related abstracts, which increased to 54 in 2013 and 71 in 2014. Abstracts related to basic science (16%), chemotherapy toxicities (16%), myeloma (16%) and epidemiology (16%) dominated the accepted abstracts. Of the clinical abstracts, >50% were case reports, 41% were retrospective studies, 4.5% database studies and <1% RCTs.

To determine the journal publication rate of these abstracts we performed a PubMed literature search using the author names and title of the abstract. A total of 38.5% of the abstracts presented at the ASN-KW 2012 that were onconephrology related were published in peer-reviewed journals. The rate was 22% for 2013 and 11.3% for 2014. In total, over the last 3 years, only onefifth (22.4%) of onconephrology-related abstracts from ASN-KW have been published as peer-reviewed journal articles. Of the articles that were published, 37.5% were basic science studies, 20% were chemotherapy toxicity related, 15% were on paraproteinemias, 7.5% were electrolyte disorders in cancer patients and 7.5% were glomerular diseases related to cancer or chemotherapy. Of note, 75% of the clinical published articles were original investigations or clinical research and 25% were case reports or case series. Clinical Kidney Journal (CKJ) has published nephrology-related clinical reports and research in the last few years. To understand the type of onconephrology research being published in the journal, we reviewed the articles published on this topic from 2012 to 2014. Search terms used to identify articles included cancer, myeloma, chemotherapy, tumor lysis, paraneoplastic syndrome and hypercalcemia. A total of 51 articles were related to cancer and the kidney. Of the 51 articles, the vast majority (90%) were case reports or images related to case reports. The remaining 10% were review articles on topics that ranged from chemotherapy toxicity to myeloma-related kidney disease. Figure 2 breaks down the 51 papers into various categories of onconephrology from CKJ. The majority of the articles were paraproteinemia related. A PubMed literature search for 'Clinical Kidney Journal AND onconephrology' retrieved no results.

In summary, over the last 3 years there has been an increase in the number of abstracts submitted during the ASN-KW related to the field of onconephrology. While this was not analyzed we can speculate that similar trends may be found in other international meetings such as International Society of Nephrology (ISN), National Kidney Foundation (NKF) and European Renal Association - European Dialysis and Transplant Association (ERA-EDTA). In addition, only one-fifth of the abstracts reviewed from ASN-KW were published in peer-reviewed journals. Basic science abstracts were more likely to be published compared with clinical abstracts. Of the clinical abstracts that were published, the majority were original investigations and the minority were case reports. This may be a reporting bias since many case reports that residents and fellows work on as scholarly projects are rarely published as full articles.

In terms of *CKJ* publications, most were case reports and review articles. The more widespread use of the keyword 'onconephrology' in all such articles may facilitate the search for onconephrology research papers. To advance the field, *CKJ* has now created a separate onconephrology manuscript subheadings, as illustrated in this issue, and the keyword 'onconephrology' has been added to the two articles published in this issue [3, 4].

Publication rates may increase if collaborative research is possible in this field. A case series of similar presentations of a rare form of paraprotein-mediated renal disease is far more helpful than a single case report. Large-center database studies from cancer centers can yield more information than single-center database analyses. Finally, randomized controlled trials in a subspecialty like onconephrology can only be possible when there is collaboration between nephrologists and cancer physicians from cancer centers around the world.

The Cancer and Kidney International Network (C-KIN) [5] is one such organization that was initiated in Europe with collaborative research in onconephrology as one of its missions. As participants in the first C-KIN 2015 summit, we believe that this is a great platform for researchers and clinicians to meet and discuss common themes and topics in onconephrology. In addition, we suggest creating a separate abstract submission section dedicated to onconephrology during ASN-KW and other international meetings to allow for collaborative research and greater understanding of cancer-related nephrology, leading to improved patient outcomes.

Conflict of interest statement

K.D.J. serves on the ASN Onconephrology Forum.

(See related articles by Lodhi et al. Thrombotic microangiopathy associated with proteasome inhibitors. *Clin Kidney J* (2015) 8:

632–636 and by Stallone *et al*. Management and prevention of post-transplant malignancies in kidney transplant recipients. *Clin Kidney J* (2015) 8: 637–644.)

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