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For more on **this congress** see <https://www.freiburger-herz-kreislauf-tage.de/wissenschaftliches-hauptprogramm>

Maintaining a gendered perspective in scientific meetings during the COVID-19 pandemic

Several studies have pointed towards the COVID-19 pandemic's potential to negatively affect career paths of women in science.^{1,2} Although the impact on manuscript submissions and publications, as one career path mechanism, has been well documented,³ an area that is often

difficult to elucidate as part of the mechanisms underlying differential progress of male and female researchers is that of invitations to give scientific talks and to chair scientific meetings. Here, the merit of such an invitation is not always transparent or as easy to assess as a publication record. However, these activities are key to a researcher's academic success.⁴ Cancellations and reorganisation of scientific meetings during the COVID-19 pandemic present an opportunity to consider the consequences of these decisions.

In October, 2020, a scientific congress of cardiology, cardiosurgery, and paediatric cardiology was held under the patronage of the German Society of Cardiology. Due to the second wave of the COVID-19 pandemic, the meeting was held virtually, and for that reason, the organising committee felt that the event needed shortening substantially. Thus, 37 of 82 speakers and chairs were disinvited a few days before the congress. 29 (41%) of 71 male speakers (95% CI 29–53%) were disinvited, whereas eight (73%) of 11 female speakers (39–94%) were disinvited, bringing the female speaker participation down from 13% to 7% of speakers.

With CIs overlapping (in part due to how few women were invited), it cannot be said whether the higher proportion of disinvited female speakers was coincidental or not. If there was a difference, it could also well be that unconscious gender bias by the organising committee (consisting of five men and one woman) was not behind the decision, but that the committee considered a range of factors, such as seniority, specialty, or external affiliation of the speaker.

Nevertheless, I believe that this example highlights how important it is for organising committees of scientific meetings to apply a gendered perspective to the difficult task of inviting and disinviting researchers to give scientific talks. I would also suggest that data on these kinds of cancellations and reorganisations in academia

are collected during the COVID-19 pandemic to assess how diversity in research is enacted when resources, such as presentation time, are scarce.

I was one of the women who was disinvited to give a talk about my work. I declare no other competing interests.

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Association of SARS-CoV-2 renal tropism with acute kidney injury

In their report on the association of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) renal tropism with acute kidney injury, Fabian Braun and colleagues¹ do not appear to have provided evidence for acute kidney injury as defined in the Kidney Disease: Improving Global Outcomes (KDIGO) clinical practice guidelines—that is, an increase in serum creatinine (SCr) by 26.5 μmol/L or more within 48 h; an increase in SCr to 1.5 times or more from baseline, which is known or presumed to have occurred within the previous 7 days; or a urine volume of less than 0.5 ml/kg per h for 6 h.² Using case 45 (a woman aged 87 years) as an example, SCr on admission was 103 μmol/L, with an estimated glomerular filtration rate (eGFR) of 43 mL/min per 1.73 m²

For the KDIGO guidelines see <https://kdigo.org/guidelines/>