The intent of ADQI is to provide an objective, dispassionate distillation of the literature and description of the current state of practice of diagnosis, prevention and treatment of acute renal failure. The purpose is to develop a consensus of opinion, with evidence where possible, on best practice and to articulate a research agenda to focus on important unanswered questions.

ADQI Results

The final results of the first ADQI consensus conference (August 2000, New York City) on CRRT will be published in November issue of *Kidney International*. In addition, the complete work group summaries will be published in the October issue of *Advances in Renal Replacement Therapy*. This special issue will also be distributed at the American Society of Nephrology meeting. The results of the ADQI CRRT consensus conference have been endorsed by several Nephrology and Intensive Care societies including the Society of Critical Care Medicine, American Society of Nephrology, Società Italiana di Nefrologia, and European Renal Association-European Dialysis and Transplant Association. Regular updates of ADQI activity are available on the ADQI website (www.ADQI.net).

The preliminary results of the second ADQI consensus conference (May 2002, Vicenza, Italy) on research in Acute Renal Failure will be published in the December issue of *Current Opinion in Critical Care*. Final results will be submitted for publication in 2003. This publication will include the first consensus criteria for ARF, The *RIFLE system* uses either GFR criteria or urine output criteria to classify patients into three severity categories: Risk Injury and Failure; and two additional outcome categories: Loss and ESRD.
Update on New Research

B.E.S.T. Kidney analyzes data from 53 centers in 23 countries around the world. In this first international epidemiological study of current practice in RRT, Rinaldo Bellomo and other investigators have examined nearly 30,000 ICU patients and found close to 2,000 patients with ARF. Remarkably, the incidence of ARF is quite similar across regions, although treatment patterns and outcome vary.

Researchers at the University of Pittsburgh and in Montana have analyzed all previous studies comparing synthetic and cellulose membranes in dialysis. This meta-analysis provides clear evidence of a survival benefit associated with synthetic membranes. Subramanian S. et al. Kidney International 2002 (Dec) in Press.

ADQI III to be held in January 2003

The third ADQI consensus conference is being held in Miami, Florida and will focus on Blood Purification in Non-Renal Disease. The meeting will be co-chaired by John Kellum (University of Pittsburgh) and Nathan Levin (Renal Research Institute, New York). Topics to be covered will include Hemofiltration and Hemoperfusion in Sepsis and Septic Shock; Plasma Therapies in Thrombotic Syndromes; Liver Assist Devices in Hepatic Failure; and Hemofiltration in Cardiac Surgery and Heart Failure. ADQI III will occur in conjunction with the International Conference on Dialysis, Fontainbleau Hilton, Miami, FL, January 29-31, 2003. This annual meeting continues to emphasize new developments and technology in the field of chronic kidney disease www.renalresearch.com/Events.htm.

KDOQI/ADQI Joint Practice Guideline on ARF

The National Kidney Foundation’s K/DOQI (Kidney Disease Quality Initiative) and ADQI are collaborating on the development of a clinical practice guideline on acute kidney failure. K/DOQI expands the Dialysis Outcomes Quality Initiative or DOQI, a project begun by the National Kidney Foundation in 1997 and recognized throughout the world for improving the care of dialysis patients, www.kidney.org.

ADQI Mission and Governance

Conceived by developed by a multi-disciplinary, international group of investigators and clinicians, ADQI is dedicated to improving the care of patients with or at risk from acute renal failure. Future topics will include intermittent RRT, and prevention of ARF. ADQI is a volunteer organization. The executive council is made up of the President, President Elect, Immediate Past President, and two members-at-large, one Nephrologist and one Intensivist. We continue to seek input from anyone interested in the improving the care of patients with ARF. We may be contacted at ADQI@ccm.upmc.edu.

Our Corporate Sponsors

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