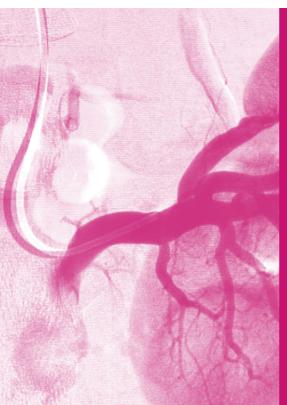


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Kidney and Dialysis



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Message from the Editor-in-Chief

Until recently, nephrology was not able to keep pace with oncology, cardiology, or rheumatology in the inexhaustible pipeline of new treatment options tested in an everincreasing number of randomized controlled trials. In recent years, we have been witnessing dramatically increased interest in the treatment of chronic kidney disease, e.g., diabetic kidney disease, glomerular disease, or autosomal dominant polycystic kidney disease, but also aimed more generally on the progression of chronic kidney disease and the complications of chronic kidney disease, such as anemia, or hyperkalemia. This progress has led to changing paradigms as reflected by several recently published KDIGO guidelines which now need to be updated much more frequently than before. To personalize treatment, we also need better diagnostic methods, including validated biomarkers reflecting the activity of the disease (including response to treatment) and predicting outcomes.

Kidney and Dialysis aims to cover most of these areas not only in terms of feature reviews, but also original articles, and to keep the reader updated on recent progress in nephrology and dialysis.

Aims

Kidney and Dialysis (ISSN 2673-8236) is an open access, peer-reviewed journal devoted to publishing articles on all aspects of the kidney. It focuses on normal kidney function and kidney disease, the preservation of kidney health and the treatment of kidney disease, from diet and medication to renal replacement therapy (dialysis and kidney transplantation). It also publishes research related to systemic conditions that affect the kidneys, such as diabetes and autoimmune disease, and systemic diseases that occur as a result of kidney disease, such as renal osteodystrophy and hypertension. Papers reporting new diagnosis methods and technologies for kidney function and disease will be welcome as well.

Editor-in-Chief Prof. Dr. Francesco Locatelli

Scope

The scope of Kidney and Dialysis includes:

- Biomarkers in kidney disease;
- Chronic kidney disease (CKD), complications, and nutrition;
- Acute kidney injury (AKI)/critical care;
- Diabetic kidney disease;
- Glomerulonephritis;
- Pregnancy and CKD;
- Hypertension and nephrology;
- ADPKD;
- Renal vasculitis;
- Lupus nephritis;
- Hereditary kidney disease;
- Renal ischemia;
- Dialysis, hemodialysis (HD), peritoneal dialysis (PD);
- Dietary management and medication;
- Kidney transplantation;
- New diagnosis methods and technologies for kidney function and disease.

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A first decision is provided to authors approximately 53.2 days after submission; acceptance to publication is undertaken in 5.9 days (median values for papers published in this journal in the first half of 2024) MDPI is a member of





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