EDITOR'S INTRODUCTION

A NEW YEAR IN PERITONEAL DIALYSIS

Efforts to predict the future are commonplace at the start of a new year. What are the significant events for peritoneal dialysis (PD) and for this journal likely to be in 2012?

Last year saw regional PD meetings in North America, Latin America, Asia, and Europe, but in 2012, one PD meeting will dominate: the Congress of the International Society for Peritoneal Dialysis (ISPD) in Kuala Lumpur, Malaysia, in September. Asia is a fitting location for this meeting given the growth of PD and the associated academic activity in the region. In particular, the meeting will provide an opportunity to focus attention on the remarkable "PD First" initiative that is under way in nearby Thailand, a topic that *Peritoneal Dialysis International* (PDI) will be addressing in detail in 2012. The host country, Malaysia, has also been very involved in the development of the PD modality in Asia, which is reflected by the increasing numbers of papers in PDI and other journals from that region and by Malaysia's willingness to host this important meeting.

This year will also likely see the appearance of data from the United States that will provide a sense of whether the much discussed "bundling" initiative which began 12 months ago is actually leading to growth in PD utilization. Informal communications suggest that the expected growth is happening, but a look at the objective data is much anticipated. The good health of PD in the country with the world's largest dialysis population is important.

On an academic level, the results of the randomized controlled "balANZ" trial carried out in Australia,

New Zealand, and Singapore under the leadership of David Johnson and Fiona Brown is likely to see print this year. Their study will be comparing a "conventional" PD solution and a solution low in glucose degradation products in approximately 180 patients followed for 2 years. Decline in residual renal function is the primary endpoint. A variety of secondary end points are also being examined. This trial will be the largest randomized study to date to look at so-called biocompatible solutions. So far, the studies have been disappointing, with no consistent evidence of clinically important benefits for PD patients. However, preliminary data from balANZ presented at the recent 2011 EuroPD and American Society of Nephrology meetings suggest that the study will show positive and somewhat surprising results. The awaited peer-reviewed publication will be of great interest to the PD community.

Guidelines are always topical—and sometimes controversial. This year will see the publication in PDI of the ISPD peritonitis and exit-site infection guidelines for children. One of PDI's 2012 issues will focus attention on the use of PD to treat acute kidney injury in the developing world. That topic has received much attention lately, with papers coming from Brazil and India, and new data emerging from sub-Saharan Africa. A supplement on PD in China is also planned.

But, of course, the major stories in PD in 2012 may eventually come from quite unexpected sources.

To all our readers and ISPD members, Happy New Year!

Peter G. Blake
Editor-in-Chief