

57th Annual Meeting Swiss Society of Nephrology SGN-SSN

Congress Kursaal Interlaken | December 4–5, 2025



Program

Registration



SGN-SSN

Schweizerische Gesellschaft für Nephrologie
Société Suisse de Néphrologie
Società Svizzera di Nefrologia
Swiss Society of Nephrology

www.swissnephrology.ch

Congress venue

Congress Kursaal Interlaken
Strandbadstrasse 44, 3800 Interlaken

www.congress-interlaken.ch

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| Invitation 2025

Dear colleagues,

On behalf of the Scientific Committee, we cordially invite you to this year's Annual Meeting of the Swiss Society of Nephrology which will be held in **Interlaken on December 4-5, 2025**.

This year's conference will focus on **lifelong kidney care**. Although transition from pediatric to adult care has been improved in many centers, it remains a critical phase in kidney patients' disease trajectory. Pediatric Nephrologists are making efforts to let go, and adult Nephrologists are keen to appreciate the often complex disease histories of patients with congenital kidney disease.

We look forward to state of the art keynote lectures and a lively exchange between the pediatric and adult nephrology communities to learn from each other by strengthening our commonalities and valuing our differences. The meeting includes a platform to exchange ideas with leading experts and includes novel sessions including several symposia, short- and long oral presentations, elevator pitches, the Young Swiss nephrologist's award and the Publication award as well as the picture challenge.

Also, this year the **Symposium Pflege in der Nephrologie/Soins en Néphrologie/Cure in Nefrologia** will be held on December 4, 2025.

Another highlight of the conference will be the **Networking-Dinner on December 4, 2025**, to which you are also cordially invited. Enjoy a wonderful evening with the nephrologist family. In addition, the Young Swiss Nephrology award as well as the poster awards will be presented during a ceremony that evening – a tribute to the outstanding scientific work of our society.

Come and join us on December 4-5 in Interlaken!

Yours sincerely,
The Congress Presidents

■ | Organization

Congress Presidents

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Wesley Hayes, Zurich
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François Verrey, Zurich

■ | General information

Congress venue	Congress Kursaal Interlaken Strandbadstrasse 44 3800 Interlaken www.congress-interlaken.ch
..	
Congress organization	HPMS Consulting AG Kreuzgasse 3 3713 Reichenbach i.K. www.hpms.ch michael.herger@hpms.ch
Registration	Online registration, prices and categories for the congress as well as the Networking-Dinner available on <u>https://bit.ly/REGSGN2025</u>
Included in the registration fees	<p>Access to the scientific sessions, congress program, certificate of participation, coffee breaks and light lunches.</p> <p>The Networking-Dinner on Thursday, December 4, 2025 is not included and has to be booked separately (see registration website above).</p> <p>Accommodation is not included and has to be organized independently. You can book and pay for your desired hotel rooms directly via the following link. <u>https://bit.ly/SGNSSN2025</u></p> <p>We would like to ask you to book your overnight stay before October 22, 2025. On this date the contingent will be greatly reduced.</p>
Payment	<p>Payment is made at the end of the registration process and is only possible by online-payment (for example credit card, debit card, twint)</p> <p>Once you have registered, you will receive a confirmation of registration, an e-ticket as well as a receipt for any expense claims you may need.</p>

Certificate of participation	The certificate of participation will be sent by e-mail (PDF) to all participants after the congress.
Cancellation	Written notification is required for all cancellations and changes. In case of cancellation 30 days prior the event, the refund of the amount paid will be done net of CHF 60.– for administrative costs. Thereafter no refund is possible. Legal jurisdiction is Berne.
Format of the event	The event is held in person, with no possibility to follow online via a live streaming. The congress language is English. «Pflegesymposien» in the respective national language. No simultaneous translation.
Industrial exhibition	An industrial exhibition will take place at the Congress venue. It will be open throughout the congress. Coffee (breaks) will be offered by exhibitors.
Oral Presentations	All oral and poster presentations must be given in English. Authors presenting an accepted paper must register and pay the appropriate registration fee. The Scientific Committee will select a number of abstracts which will be presented as oral presentations as such:
Long Oral Presentation (Thursday, December 4, 2025)	The time slot for classical oral presentation is 10 minutes (8-minute presentation and 2-minute discussion).
Short Oral Presentation (Thursday, December 4, 2025)	The short oral presentation is designated to stimulate the discussion on posters. Each speaker will present the essence of his work in 3-minute presentation, followed by 2-minute discussion. The abstracts selected for this session will be also presented as classical printed-out posters. The poster format is DIN A0 (120x85 cm) (heightxwidth). The best posters will be awarded with a dedicated prize. The prizes will be awarded before the Networking-Dinner on Thursday, December 4, 2025 from approx. 19.30 hrs. The presence of the winners is desired.

Elevator pitch format
(Friday, December 5, 2025)

Selected case reports will be presented in the «elevator pitch» format, an innovative, dynamic presentation format aiming at the active interaction with the public. The first part of all authors will have 1 minute to present 1 slide to convince the jury (= audience) of the quality of their work, in order to be selected for the second part and the presentation of additional 5-minute presentation (+ 2min-discussion).

Pecha-Kucha storytelling format
YSN best oral presentation
(Thursday, December 4, 2025)

Selected abstracts for the YSN Best Oral Presentation will be presented in the innovative Pecha-Kucha storytelling format. The presentation consists of 20 slides (exactly 20) and each slide must be shown for 20 seconds. The best presentations will be awarded with a dedicated prize. **The prizes will be awarded before the Networking-Dinner on Thursday, December 4, 2025 from approx. 19.30 hrs. The presence of the winners is desired.**

Postwerwalk
SGN Awards

There will be no organized Posterwalk
The SGN Awards will take place during the Networking-Dinner on Thursday, December 4, 2025

Credits

Credit points will be given by the following societies:
SGN-SSN 16 credits
SGAIM-SSMIG 7 credits

ERA National Society
of Nephrology Grant

ERA is promoting an initiative that involves the National Societies of Nephrology.

Specifically, ERA is offering an opportunity for each National Society consisting in three years of free ERA membership (Junior membership) plus one free Congress Membership to the annual ERA Congress; this ERA National Society of Nephrology Grant is given to a young person (under 40 years old) by the Swiss Society of Nephrology.

This year the grant will be chosen during the Young Swiss Nephrologists' Award session on Thursday, December 4, 2025.

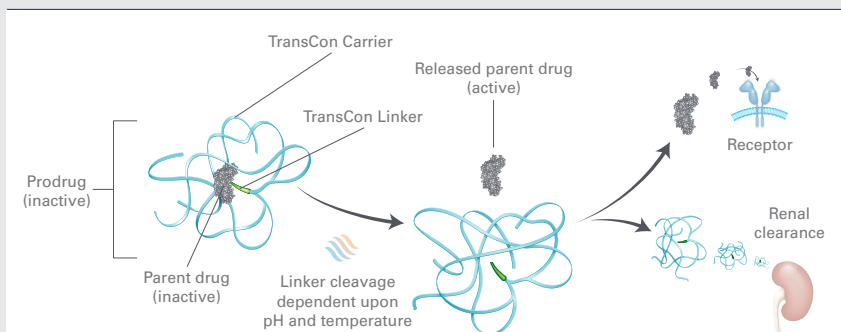
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TransCon Technology

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Because the parent drug is unmodified, its original mode of action is expected to be maintained; Carrier-Linker is cleared renally.

Reference: Thornton PS, Maniatis AK, Aghajanova E, et al. Weekly lonapegsomatropin in treatment-naïve children with growth hormone deficiency: the phase 3 heiGHT trial. J Clin Endocrinol Metab. 2021;106(11):3184–3195.

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■ | Program at a glance

Thursday, December 4, 2025

	Theatersaal Room 1	Ballsaal Room 2
from 08.00	Registration and door opening Networking Area	
08.30–08.45	Welcome address	
08.45–09.30	State of the Art: The UK Kidney Ecosystem - Enabling Clinical Research for adults and children Dr. Louise Oni	
09.30–10.10	Short oral 1	Short oral 2
10.10–10.20	Short break	
10.20–11.00	Short oral 3	Short oral 4
11.00–11.30	Coffee break	
11.30–12.15	Parallel Symposium: Boehringer Ingelheim The CKD patient journey: snapshot from Switzerland and innovations from the UK Prof. Smeeta Sinha Prof. Grégoire Wuerzner	Parallel Symposium: CSL Vifor IgAN and the 2025 KDIGO Guidelines: DEARA's Clinical Journey Has Begun PD Dr. Min Jeong Kim One Year Later: Learnings from the First DEARA Experience Dr. Domenico Cozzo
12.15–13.00	State of the Art: The Benefits of Home HD: Pregnancy in Kidney Failure Prof. Dr. Christopher T. Chan	Parallel Symposium: GlaxoSmithKline AG Viral Encounters in Kidney Care: Understanding the Burden of Disease and Role of Vaccination Prof. Dr. med. Uyen Huynh-Do Prof. Dr. med. Ulrich Heiningner
13.00–13.45	Lunch break	
13.45–14.30	State of the Art: Advances in therapy for Nephrotic syndrome Prof. Dr. Moin Saleem	Parallel Symposium: Ascendis Pharma Replacing What's Missing: Decoding Renal Clues in Hypoparathyroidism Prof. Dr. Olivier Bonny Prof. Dr. Andrea Trombetti Dr. Jean-Philippe Bertocchio
14.30–15.15	Parallel Symposium: Sanofi Nephrological perspectives on thrombotic microangiopathies: When every minute determines organ function Prof. Dr. Andreas Holbro Prof. Dr. Fadi Fakhouri	Parallel Symposium: AstraZeneca TREAT-CKD - New horizons in improving patient outcomes in complex challenges with CKD Prof. Dr. Grégoire Wuerzner Prof. Dr. Britta George Prof. Dr. Sophie de Seigneux
15.15–15.45	Coffee break	
15.45–17.40	Long Oral	
17.40–18.20	Young Swiss Nephrology Award	
18.20–22.00	Apéro and Networking-Dinner	

■ | Program at a glance

Pflege in der Nephrologie - Soin en Néphrologie - Cure in Nefrologia **Thursday, December 4, 2025**

	Club Casino Room 3
08.45–09.30	Pflegesymposium Implementierung und Evaluation der APN-Rolle auf der Dialyse/Nephrologie im USB Petra Meury
09.30–10.10	Pflegesymposium Transportkosten zum Dialysezentrum - Eine Herausforderung für die Patient:innen Sabrina Gröble
10.10–10.20	kurze Pause
10.20–11.00	Pflegesymposium Begleitung von Kindern mit chronischer Niereninsuffizienz und ihren Familien Rahel Gnägi
11.00–11.30	Kaffeepause
11.30–12.15	Pflegesymposium Der positive Umgang mit einer Nierenerkrankung Thomas Hunziker
12.15–13.00	Pflegesymposium Immersion in der Hochschullehre - «Bewegtes» klinisches Assessment in der Nephrologiepflege Prof. Dr. Elke Steudter
13.00–13.45	Mittagspause
13.45–14.30	Pflegesymposium L'utilizzo delle simulazioni in dialisi come strumento formativo per il personale Elisa Guerra
14.30–15.15	Pflegesymposium L'ipnosi nei pazienti dializzati, in particolare per la gestione di dolori Giovanni Isella
15.15–15.45	Kaffeepause
15.45–16.40	Pflegesymposium Pflege von Patient:innen mit eingeschränkter Nierenfunktion in der Langzeitinstitution Sabine Herzig
16.40–17.35	Pflegesymposium Kunststoffverpackungen rezyklieren mit KEIS Michael Gasser

■ | Program at a glance

Friday, December 5, 2025

	Theatersaal Room 1	Ballsaal Room 2
from 08.00	Door opening Networking Area	
08.30–09.45	General Assembly SGN/SSN	
09.45–10.00	SGN Publication Award 2025	
10.00–10.15	Short break	
10.15–11.00	Parallel Symposium: Otsuka Future Perspectives of IgAN Manage- ment Prof. Dr. med. Uyen Huynh-Do PD Dr. med. Michael Rudnicki	Parallel Symposium: Roche Pharma (Schweiz) AG Unlocking Better Outcomes: Advances in Immunotherapy for Lupus Nephritis Prof. Dr. Andrea Rubbert-Roth PD Dr. med. Harald Seeger
11.00–11.30	Coffee break	
11.30–12.15	State of the Art Phenotypic expression of kidney tubular disorders. Age matters! Prof. Dr. med. Martin Konrad	Parallel Symposium: Novartis A new era for managing IgA nephropathy and C3G: Evolution of clinical approaches Prof. Uyen Huynh-Do Prof. Patricia Hirt-Minkowski
12.15–13.00	Parallel Symposium: Alnylam Experiences with rare diseases in nephrology - how do you recognise and treat these patients? Prof. Dr. med. Wesley Hayes Dr. med. Sibylle Tschumi Prof. Dr. med. Daniel Fuster	Parallel Symposium: Swedish Orphan Biovitrum AG The Future of C3G and p IC-MPGN Treatment: Innovations and Implica- tions for Adults and Adolescents Prof. Dr. med. Uyen Huynh-Do Prof. Dr. med. Fadi Fakhouri Prof. Dr. med. Wesley Hayes
13.00–14.00	Lunch break	
14.00–14.45	Picture Challenge	Parallel Symposium: Spirig HealthCare AG Unlocking the Potential: IgAN-Care with Nefecon* —A New Era in Treatment. Guidelines, Evidence, and the Swiss Framework Dr. Olivier Phan Prof. Jürgen Floege PD Dr. Harald Seeger
14.45–15.30	State of the Art: Kidney Care in an unequal World Dr. sc. med. Valerie Luyckx	
15.30–15.45	Farewell address	
	Club Casino Room 3	
10.15–11.00	Elevator Pitch	
11.30–12.00	Swiss Dialysis Registry	

■ | Scientific program – 04.12.2025

Thursday, December 4

from 08.00	Door opening Networking Area	Networking Area
08.30–08.45	Opening & Welcome Address of the 57th Annual Meeting of the Swiss Society of Nephrology	Room Theatersaal
08.45–09.30	State of the Art Lecture 1: The UK Kidney Ecosystem - Enabling Clinical Research for adults and children Dr. Louise Oni, Liverpool (UK)	Room Theatersaal
09.30–10.10	Short Oral Session 1 Clinical Nephrology	Room Theatersaal
09.32/SO-04	CENSUS-EU: An observational study to investigate prevalence and burden of chronic kidney disease-associated pruritus in Europe, Switzerland included.	Fabienne Aregger, Bern
09.37/SO-12	Expanding Therapeutic Boundaries: First Experience with Obinutuzumab in a Dialysis Patient with systemic Lupus Erythematoses	Ilirjana Bajraktari, Bern
09.42/SO-08	Diffusion and multiparametric MRI radiomics predict renal function decline in ADPKD	* Matteo Bargagli, Bern
09.47/SO-10	Efficacy and Safety of Palopegteriparatide Treatment in Adults With Hypoparathyroidism: 3-Year Results From the Phase 3 PaTHway Trial	Jean-Philippe Bertocchio, Paris (FRA)
09.52/SO-27	Regression of proteinuria during pregnancy in women with proteinuric nephropathy: impossible or uncommon?	* Domenico Cozzo, Genève
09.57/SO-20	Nephrologists' Survey on the Management of Chronic Kidney Disease-associated Mineral and Bone Disorders in Switzerland	* Noemi Galliker, Burgdorf
10.02/SO-29	Urinary biomarker analysis reveals rapid intra-renal anti-inflammatory and anti-fibrotic effects of sparsentan in IgA nephropathy (IgAN) in the SPARTAN study	Stéphane Genoud, Villars-sur-Glâne

* = YSN submission



Thursday, December 4

09.30–10.10	Short Oral Session 2 Basic Science	Room Ballsaal
09.32/SO-09	Dysregulation of a Nephrin-Associated Phospho-Protein Network Impairs Filtration and Podocyte Adhesion	* Carolin Eul, Zürich
09.37/SO-02	Biochemical and molecular biological analysis of (likely) pathogenic NPHS2 missense variants	* Carolin Eul, Zürich
09.47/SO-22	Oxygenation at birth restores NKCC2 and NCC expression, partially explaining the transient nature of Bartter Syndrome type 5	Stefan Rudloff, Bern
09.52/SO-06	Could TrkC activation provide a potential avenue for therapeutic intervention in AKI?	Sucheta Sridhar, Zürich
09.57/SO-25	Prediction of NPHS1 Variant Pathogenicity in Monogenic Nephrotic Syndrome	Sucheta Sridhar, Zürich
10.02/SO-23	Pegcetacoplan demonstrates sustained 52-week efficacy and safety across subgroups in C3G and primary IC-MPGN: results from the VALIANT trial	Fadi Fakhouri, Lausanne
10.10–10.20	Short break	Networking Area
10.20–11.00	Short Oral Session 3 Clinical Nephrology	Room Theatersaal
10.22/SO-28	The use of SGLT-2 inhibitors in kidney transplant recipients with diabetes: a single-centre experience	Katarina Liskova, Basel
10.27/SO-13	Feasibility of Implementing Electronic Patient-Reported Outcome Measures (ePROMs) in Hemodialysis: A Pilot Study in a Secondary Care Hospital in Switzerland	* Thomas Reich, Solothurn
10.32/SO-07	Diagnostic and therapeutic management in severe hyponatremia: impact of guideline adherence on clinical outcomes	Michael Reuster, Bern
10.37/SO-17	Indapamide and Chlorthalidone to Reduce Urine Supersaturation for Secondary Prevention of Kidney Stones: a Randomized, Double-blind, Crossover Trial (INDAPACHLOR Trial)	* Martin Scoglio, Bern

* = YSN submission



Thursday, December 4

10.42/SO-18	Late-onset Cobalamin C deficiency associated atypical hemolytic uremic syndrome – diagnostic pitfalls: a case report.	Martha Stampfli, Bern
10.47/SO-21	Oral Glucocorticoid Burden in Lupus Nephritis: A Swiss Cohort Analysis	* Maria Wallner, St. Gallen
10.52/SO-26	Proteomic Profiling Reveals Complement and Endothelin Pathway Activation in Recurrent IgA Nephropathy	Matthieu Halfon, Lausanne
10.57/SO-11	Epidemiological and Genetic Investigation of <i>Pneumocystis jirovecii</i> Pneumonia Outbreak in Kidney Transplant Recipients: Evidence for Human-to-Human Transmission?	* Laura Cereghetti, Lugano
10.20–11.00	Short Oral Session 4 Transplantation	Room Ballsaal
10.22/SO-15	HLA Class II on Urinary EVs: A Marker of Acute Renal Allograft Injury	Jakob E. Brune, Basel
10.27/SO-14	First Swiss experience with Sparsentan in reducing proteinuria in a transplant recipient with recurrent IgA nephropathy - a case report	Rüdiger Eisel, Altstätten
10.32/SO-03	Case report: belatacept-induced colitis in a renal transplant recipient	* Aurélie Huber, Genève
10.37/SO-24	Prediction and outcome of recurrent membranous nephropathy after kidney transplantation – data from the Swiss Transplant Cohort Study	Laila-Yasmin Mani, Bern
10.42/SO-01	aggressive drug deprescribing in selected patients after belatacept conversion	Corinna Pletz, Bern
10.47/SO-16	Impact of Metamizol Exposure on Early Tacrolimus Levels in KT Recipients	* Diana Szücs, Bern
10.52/SO-05	Correlation of Banff-based Activity and Chronicity Indices with Injury Dimension, Rejection Classifier, and Rejection Archetype Scores from Biopsy-based Transcript Diagnostics	* Florian Westphal, Zürich
11.00–11.30	Coffee break	Networking Area

* = YSN submission



Thursday, December 4

11.30–12.15	Parallel Symposium by Boehringer Ingelheim The CKD patient journey: snapshot from Switzerland and innovations from the UK Prof. Smeeta Sinha, Manchester (UK) Prof. Grégoire Wuerzner, Lausanne Chair: Prof. Andrew Hall, Zürich	Room Theatersaal
11.30–12.15	Parallel Symposium by CSL Vifor IgAN and the 2025 KDIGO Guidelines: DEARA's Clinical Journey Has Begun PD Dr. Min Jeong Kim, Aarau One Year Later: Learnings from the First DEARA Experience Dr. Domenico Cozzo, Genève Chair: PD Dr. Min Jeong Kim, Aarau	Room Ballsaal
12.15–13.00	State of the Art Lecture 2: The Benefits of Home HD: Pregnancy in Kidney Failure Prof. Dr. Christopher T. Chan, Toronto (CAN)	Room Theatersaal
12.15–13.00	Parallel Symposium by GlaxoSmithKline AG Viral Encounters in Kidney Care: Understanding the Burden of Disease and Role of Vaccination Prof. Dr. med. Uyen Huynh-Do, Bern Prof. Dr. med. Ulrich Heininger, Basel	Room Ballsaal
	Viral Encounters: Understanding the Burden on Kidney Health	Uyen Huynh-Do
	Vaccination Recommendations for Patients with Chronic Renal Disease	Ulrich Heininger
13.00–13.45	Lunch break	Networking Area
13.45–14.30	State of the Art Lecture 3: Advances in therapy for Nephrotic syndrome Prof. Dr. Moin Saleem, Bristol (UK)	Room Theatersaal
13.45–14.30	Parallel Symposium by Ascendis Pharma Replacing What's Missing: Decoding Renal Clues in Hypoparathyroidism Prof. Andrea Trombetti, Genève Dr. Jean-Philippe Bertocchio, Paris (FRA) Chair: Prof. Dr. Olivier Bonny, Fribourg	Room Ballsaal

Thursday, December 4

14.30–15.15	Parallel Symposium by Sanofi Nephrological perspectives on thrombotic microangiopathies: When every minute determines organ function Prof. Dr. med. Fadi Fakhouri, Lausanne Prof. Dr. med. Andreas Holbro, Basel	Room Theatersaal
	Decoding the TMA puzzle: Differential diagnostic challenges through the renal lens	Fadi Fakhouri
	aTTP treatment landscape: Current strategies, best practices and future perspectives	Andreas Holbro
14.30–15.15	Parallel Symposium by AstraZeneca TREAT-CKD - New horizons in improving patient outcomes in complex challenges with CKD Prof. Dr. Grégoire Wuerzner, Lausanne Prof. Dr. Britta George, Zürich Prof. Dr. Sophie de Seigneux, Genève	Room Ballsaal
15.15–15.45	Coffee break	Networking Area
15.45–17.40	Long Oral Session 1+2 Renal replacement therapy Clinical Nephrology	Room Theatersaal
15.48/LO-18	Association of Chronic Fatigue with Dialysis Recovery Time in Hemodialysis Patients	Paulo de Sousa, Genève
15.59/LO-14	Practice patterns of routine blood sampling in Swiss hemodialysis centers and their influence on laboratory data and patient outcome	* Sophie Feuchter, Frauenfeld
16.10/LO-11	Incremental Dialysis in Switzerland: Trends, patient characteristics, regional variation and outcomes	Rebecca Guidotti, Zürich
16.21/LO-07	Determinants of Dialysis Modality Choice in End-Stage Chronic Kidney Disease: Patient and Healthcare Professional Perspectives	Nancy Helou, Lausanne
16.32/LO-09	Health care costs associated with chronic kidney disease in Switzerland: a retrospective claims analysis, 2015-2023	Michael Stucki, Winterthur

* = YSN submission



Thursday, December 4

16.43/LO-15	Predictors of Stone Recurrence in the NOSTONE Trial: Post Hoc Analysis	* Matteo Bargagli, Bern
16.54/LO-05	Chasing ghosts? - Osmotic Demyelination Syndrome in a high risk cohort of 110 patients with very profound hyponatremia (Serum-Na < 110 mmol/l)	Florian Buchkremer, Luzern
17.05/LO-13	Pegcetacoplan maintains proteinuria reduction and stable eGFR in pediatric patients over 52 weeks in the phase 3 VALIANT trial	Wesley Hayes, Zürich
17.16/LO-17	The Swiss Kidney Biopsy Registry: Results of the Pilot Phase	Andreas Kistler, Frauenfeld
17.27/LO-02	Atypical haemolytic uremic syndrome patients' perspective in the era of complement inhibitors.	Nora Schwotzer, Lausanne
15.45–17.20	Long Oral Session 3+4 Transplantation Basic Science	Room Ballsaal
15.47/LO-10	Immune Pathway Overlap in Recurrent IgA Nephropathy and T cell mediated rejection: A Proteomic Study	Mathieu Halfon, Lausanne
15.57/LO-12	Long-term health risks in living kidney donors: 30 years of prospective experience from the Swiss Organ Living-Donor Health Registry	Patricia Hirt-Minkowski, Basel
16.07/LO-04	Characteristics and outcome of membranous nephropathy in Switzerland – data from the Swiss Transplant Cohort Study	Laila-Yasmin Mani, Bern
16.17/LO-08	Factors affecting allosensitization before kidney retransplantation	* Elena Rho, Zürich
16.27/LO-01	Antibody-Mediated Rejection in ABO-Incompatible Kidney Transplantation: The Role of Biopsy-Based Transcript Diagnostics in Differentiating Immune Accommodation from Alloimmune Injury	* Lukas Weidmann, Zürich
16.37/LO-06	Deleterious effect of dietary potassium on kidney fibrosis in the UUO model and the POD ATTAC glomerular disease model	* Thibaut Charlemagne, Genève
16.47/LO-03	Calcium phosphate mineral formation and dynamics in bilateral ischemia-reperfusion injury	Miguel Correia, Bern

* = YSN submission



Thursday, December 4

16.57/LO-19	Transcriptional mapping of thrombotic microangiopathy in human kidney	Anna Rinaldi, Basel
17.07/LO-16	Sex-specific changes in tubular repair and immune responses after renal ischemia-reperfusion injury.	* Louis Stavart, Lausanne
17.40–18.20	Young Swiss Nephrology Award	Room Theatersaal
17.43 YSN-04	Unravelling the critical role of Wdr72 for kidney function	* Hannah Auwerx, Zürich
17.52 YSN-03	The role of casts in proximal tubule injury and atrophy	* Anna Faivre, Genève
18.01 YSN-01	Inter-Center Variability Of Biopsy-Based Transcript Diagnostics – Comparison Of Banff Lesions With Molecular Scores	* Dusan Harmacek, Zürich
18.10 YSN-02	Short-term effects of an SGLT2 inhibitor on divalent ions in autosomal dominant polycystic kidney disease (ADPKD): the SIDIA trial	* Lorena Roth, Chur
starting at 18.20	Aperitif	Foyer Congress Kursaal Interlaken
starting at 19.30	Networking Dinner and Awards Ceremony	Room Ballsaal

* = YSN submission



■ | Scientific program – 05.12.2025

Friday, December 5

from 08.00	Door opening Networking Area	Networking Area
08.30–09.45	General Assembly SGN/SSN	Room Theatersaal
09.45–10.00	SGN Publication Award 2025	Room Theatersaal
	Spatiotemporal Landscape of Kidney Tubular Responses to Glomerular Proteinuria	Anna Faivre, Genève
10.00–10.15	Short break	Networking Area
10.15–11.00	Parallel Symposium by Otsuka Future Perspectives of IgAN Management Prof. Dr. med. Uyen Huynh-Do, Bern PD Dr. med. Michael Rudnicki, Innsbruck (AUT)	Room Theatersaal
10.15–11.00	Parallel Symposium by Roche Pharma (Schweiz) AG Unlocking Better Outcomes: Advances in Immunotherapy for Lupus Nephritis Prof. Dr. Andrea Rubbert-Roth, St. Gallen PD Dr. med. Harald Seeger, Baden	Room Ballsaal
10.15–11.00	Elevator Pitch - Phase 1: all authors	Room Club Casino
10.17/EP-05	Long-Term Efficacy and Safety of Palopegteriparatide Treatment in Adults With Chronic Hypoparathyroidism: 4-Year Results From the Phase 2 PaTH Forward Trial	Olivier Bonny, Fribourg
10.18/EP-04	It is never too late - recovery of kidney function with complement inhibition	Jan Bruegger, Horgen
10.19/EP-07	Metabolic risk after living kidney donation: An analysis of the Swiss Organ Living-Donor Health Registry	Deborah Buess, Basel
10.20/EP-14	Unraveling a mechanism underlying hepatitis E-associated kidney disease: the discovery of HEV ORF2 capsid protein- associated immune complex glomerulonephritis	Birgit Helmchen, Zürich
10.21/ EP-13	Two Cases of Hyperacute Rejection After ABO Incompatible Kidney Transplantation: What Lurks Behind the Titre?	Kerstin Hübel, Zürich

Friday, December 5

10.22/EP-06	Long-term prediction of renal function decline using diffusion MRI in kidney transplant and CKD patients	* Aurélie Huber, Genève
10.23/EP-01	"Isolated v-lesions" do not show molecular rejection, but in combination with microvascular inflammation, increase the probability of molecular mixed rejection	* Evelyn Kowarik, Luzern
10.24/ EP-11	Single-Kidney Transplantation with Discarded Partner Kidney vs. Dual Kidney Transplantation: Results from a National Cohort Study	* Christian Kuhn, St. Gallen
10.25/EP-12	sodium bicarbonate and volume retention in metabolic acidosis after kidney transplantation – a post hoc analysis	Alexander Ritter, St. Gallen
10.26/ EP-08	metabolic safety of long-term citrate therapy in high-risk kidney stone formers	Alexander Ritter, St. Gallen
10.28/ EP-03	Donor-derived metastatic tumor presenting six years after kidney transplantation	Unal Tokkuzun, Lugano
10.29/ EP-02	Acute kidney injury after catheter-directed thrombolysis versus thrombo-aspiration by AngloJet in patients with acute lower limb ischaemia	Melanie Saul, Lausanne
10.30/ EP-09	Molecular Rejection Signals in Chronic-Active T Cell-Mediated Rejection: Histological Drivers and Potential Outcome Implications	* Lukas Weidmann, Zürich

followed by **Presentation rating by the audience**

followed by **Phase 2:
selected long presentations**

11.00–11.30	Coffee break	Networking Area
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* = YSN submission

Friday, December 5

11.30–12.15	State of the Art Lecture 4: Phenotypic expression of kidney tubular disorders. Age matters! Prof. Dr. med. Martin Konrad, Münster (DE)	Room Theatersaal
11.30–12.15	Parallel Symposium by Novartis A new era for managing IgA nephropathy and C3G: Evolution of clinical approaches Prof. Uyen Huynh-Do, Bern Prof. Patricia Hirt-Minkowski, Basel	Room Ballsaal
11.30–12.15	SRRQAP - Swiss Dialysis Registry	Room Club Casino
12.15–13.00	Parallel Symposium by Alnylam Experiences with rare diseases in nephrology - how do you recognise and treat these patients? Prof. Dr. med. Wesley Hayes, Zürich Dr. med. Sibylle Tschumi, Bern Prof. Dr. med. Daniel Fuster, Bern	Room Theatersaal
12.15–13.00	Parallel Symposium by Swedish Orphan Biovitrum AG The Future of C3G and p IC-MPGN Treatment: Innovations and Implications for Adults and Adolescents Prof. Dr. med. Uyen Huynh-Do, Bern Prof. Dr. med. Fadi Fakhouri, Lausanne Prof. Dr. med. Wesley Hayes, Zürich	Room Ballsaal
13.00–14.00	Lunch break	Networking Area
14.00–14.45	YSN Picture Challenge	Room Theatersaal

Friday, December 5

14.00–14.45	Parallel Symposium by Spirig HealthCare AG Unlocking the Potential: IgAN-Care with Nefecon* — A New Era in Treatment. Guidelines, Evidence, and the Swiss Framework *Budesonid targeted release Dr. Olivier Phan, Lausanne Prof. Jürgen Floege, Aachen (GER) PD Dr. Harald Seeger, Baden	Room Ballsaal
	KDIGO 2025 IgA Nephropathy Guidelines: Key Updates and Clinical Implications	Jürgen Floege
	Nefecon (Kinpeygo®) in IgA Nephrop- athy: Evidence and the Swiss Framework	Harald Seeger
14.45–15.30	State of the Art Lecture 5: Kidney Care in an unequal World Dr. sc. med. Valerie Luyckx, Zürich	Room Theatersaal
15.30	Farewell address	Room Theatersaal

■ | Book of Abstracts

Supplement «swiss medical weekly» – December 2025

For the 57th Annual Meeting of the Swiss Society of Nephrology



This Book of Abstract was realized
in cooperation with:

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■ | Invitation «SGN-SSN Networking-Dinner»



As every year, a highlight of the conference is the dinner on Thursday evening. We look forward to seeing many of you there.

Date	Thursday, December 4, 2025
Time	Starting at 18h20
Place	Foyer and «Ballsaal» Room at the Congress Kursaal Interlaken
Registration	required and possible through the regular congress inscription



It's time to raise the standard

In Lupus care

Systemic lupus erythematosus (SLE)

EULAR 2023 Guidelines also recommend Benlysta before Immunosuppressants in case of non-response to HCQ or failure to reduce steroids to $\leq 5\text{mg/day}^1$

Lupus Nephritis (LN)

EULAR 2023 and KDIGO 2024 Guidelines recommend Benlysta for initial and maintenance treatment of active proliferative LN¹ class III/IV +/-V²

MY
ORGANS
ARE AT
RISK

Benlysta is the only approved biologic for the treatment of SLE and LN³ that has been shown to prevent organ damage in SLE.^{4,5}

HCQ = Hydroxychloroquin; LN = Lupusnephritis; SLE = Systemischer Lupus erythematosus.

Two propensity score-matched analyses have shown a significantly lower probability of increasing organ damage with Benlysta + standard therapy than with standard therapy alone.^{4,5} **References:** 1. Fanouriakis A et al. EULAR recommendations for the management of systemic lupus erythematosus: 2023 update. *Ann Rheum Dis*. 2024;83(1):15-29. 2. Kidney Disease: Improving Global Outcomes (KDIGO) Lupus Nephritis Work Group. KDIGO 2024 Clinical Practice Guideline for the Management of Lupus Nephritis. *Kidney Int*. 2024;105(1S):S1-S69. 3. SmPC Benlysta (July 2025). GlaxoSmithKline AG, www.swissmedinfo.ch (last viewed September 2025).

4. Urowitz MB et al. Organ damage in patients treated with belimumab versus standard of care: a propensity score-matched comparative analysis. *Ann Rheum Dis*. 2019;78(3):372-379. 5. Urowitz MB et al. Comparative analysis of long-term organ damage in patients with systemic lupus erythematosus using belimumab versus standard therapy: a post hoc longitudinal study. *Lupus Sci Med*. 2020;7(1):e000472.

BENLYSTA is indicated for the reduction of disease activity in patients aged 5 years and older (infusion solution) and in patients aged 18 years and older (subcutaneous injection) respectively with active autoantibody positive systemic lupus erythematosus (SLE) who are receiving standard therapy. Treatment of lupus nephritis (LN) in adult patients receiving standard therapy. Belimumab has not been studied in patients with severe active central nervous system lupus.

BENLYSTA powder for making an infusion solution, solution for subcutaneous injection. **At:** Belimumab. **I:** Reduction of disease activity in patients aged 5 years and older (infusion solution) and in patients aged 18 years and older (subcutaneous injection) respectively with active autoantibody positive systemic lupus erythematosus (SLE) who are receiving standard therapy. Treatment of lupus nephritis (LN) in adult patients receiving standard therapy. Belimumab has not been studied in patients with severe active central nervous system lupus. **D:** Infusion solution (SLE patients ≥ 5 years; LN patients ≥ 18 years): 10 mg/kg on Days 0, 14, 28, and at 4 weeks intervals thereafter. **Solution for subcutaneous injection (patients ≥ 18 years):** SLE: 200 mg once weekly (independent of body weight); LN: Patients initiating therapy with Benlysta for active LN: 400 mg once weekly for 4 doses, then 200 mg once weekly thereafter. Patients continuing therapy with Benlysta for active LN: 200 mg once weekly. **CI:** Hypersensitivity to one of the ingredients. **WIP:** Injection- and hypersensitivity reactions are possible, which can be severe, or fatal (delay in onset, and recurrence after initial resolution possible). Increased risk of infection possible. Presenting neurological symptoms, possibility of progressive multifocal leukoencephalopathy (PML) should be considered. Increased potential risk for development of malignancies. Before treatment with belimumab, the patient's risk for depression or suicide must be carefully evaluated and the patient must be monitored accordingly during treatment. The physician must be contacted in the event of new or worsening psychiatric symptoms. Available data cannot confirm safety and efficacy of rituximab administered concurrently with belimumab. Live vaccines should not be given for 30 days before or concurrently with Belimumab. **IA:** No drug interaction studies have been conducted. Evidence of increased clearance of belimumab i.v. when co-administered with steroids and ACE inhibitors. **PIL:** Pregnancy: Belimumab should only be used if the potential benefit to the mother justifies the potential risk to the foetus. If indicated, women of childbearing age should use adequate contraceptive measures while being treated and for at least four months after the last treatment. **Lactation:** Safety not verified. In consideration of all aspects it is recommended to consider discontinuing breast-feeding. **UE:** Very common: Infections, nausea, diarrhoea. Common: Hypersensitivity, infusion- and injection-related reaction, pyrexia, (rhino)pharyngitis, bronchitis, cystitis, gastroenteritis viral, pain in extremity, insomnia, depression, migraine, leucopenia, rash, urticaria, reactions at the administration site (s.c.-injection). Uncommon: o. bradycardia, anaphylactic reaction, angioedema, suicidal thoughts, suicidal behavior. **Store:** at $+2^\circ\text{C}$ to $+8^\circ\text{C}$; do not freeze. **P:** Powder for making an infusion solution: 120 mg and 400 mg vial. Solution for subcutaneous injection: Autoinjector 200 mg (1 ml) x1 and x4. **DC:** Vial: A. Autoinjector: B. **Last updated:** July 2025. GlaxoSmithKline AG, 6340 Baar. Detailed information you can find under www.swissmedinfo.ch. Please report adverse drug reactions under pr.swiss@gsk.com. Specialised persons can request the mentioned references from GlaxoSmithKline AG.

BENLYSTA demonstrates a consistent safety profile compared to standard therapies. Very common: Infections, nausea, diarrhoea. Common: Hypersensitivity, infusion- and injection-related reaction, pyrexia, (rhino)pharyngitis, bronchitis, cystitis, gastroenteritis viral, pain in extremity, insomnia, depression, migraine, leucopenia, rash, urticaria, reactions at the administration site (s.c.-injection).

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GlaxoSmithKline AG, Neuhofstrasse 4, 6340 Baar.

This fictitious patient image is for illustrative purposes only

PM-CH-BEL-ADVR-250002-09/2025

Benlysta
(belimumab)

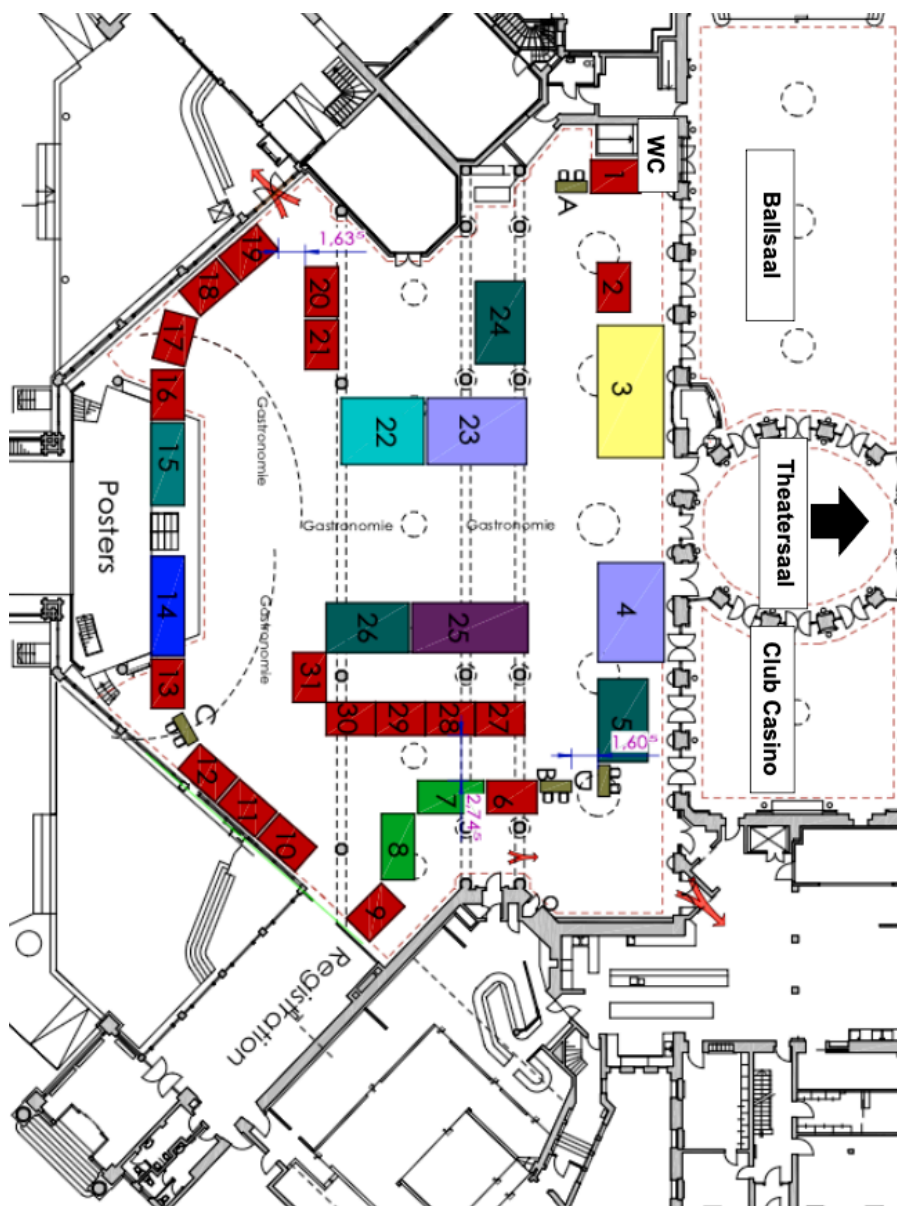
10+
YEARS

GSK

Notes

This image shows a single sheet of white paper with horizontal red ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

■ | Plan of exhibition



■ | Exhibitors

Company	Booth
AIRG Suisse	C
Alexion Pharma GmbH	26
Alnylam Switzerland GmbH	28
Amgen Switzerland AG	16
Ascendis Pharma	1
Astellas Pharma AG	2
AstraZeneca AG	26
Boehringer Ingelheim (Schweiz) AG	15
Bracco Suisse SA	9
Chiesi SA	19
CSL Vifor	4
Devatis AG	13
EPA	B
Forni Medical GmbH	18
Fresenius Medical Care (Schweiz) AG	3
GlaxoSmithKline AG	14
Hemotech Switzerland GmbH	7
MCM SCHAUBLIN	12
Medtronic	21
MSD Merck Sharp & Dohme AG	22
Nova Biomedical Schweiz GmbH	11
Novo Nordisk Pharma AG	27
Novartis Pharma Schweiz AG	17
OM Pharma Suisse SA	8
Otsuka Pharmaceutical (Switzerland) GmbH	25
Rhythm Pharmaceuticals Germany GmbH	29
Roche Pharma (Schweiz) AG	30
Salmon Pharma GmbH	6
Sanofi-Aventis (Schweiz) AG	5
SRRQAP	10
Spirig HealthCare AG	31
Takeda Pharma AG	20
Theramed AG	24
Vantive GmbH	23
Verband Nierenpatienten Schweiz	D
Young Swiss Nephrology	A

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INNO₂VATIVE

anaemia control for dialysis-dependent CKD patients^{2,3}

For further information,
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by email: info@salmon-pharma.com

or by telephone: 061 313 79 65.



References: 1. List of specialties (SL/LS), www.spezialitaetenliste.ch, status December 2025. 2. Summary of product characteristics Vafseo® (vadadustat), www.swissmedicinfo.ch (08/2024). 3. Eckardt KU et al. Safety and Efficacy of Vadadustat for Anemia in Patients Undergoing Dialysis. N Engl J Med 2021;384:1601–1612. **Medical professionals can request the listed references.**

▼ This medicinal product is subject to additional monitoring. For further information, see the Vafseo® information for healthcare professionals at www.swissmedicinfo.ch.

Vafseo®, PI: Vadadustat I/U: In adults undergoing permanent dialysis treatment for the treatment of symptomatic anaemia in chronic kidney disease
D/A: Starting dose 300mg once daily **C:** Hypersensitivity to the active substance or one of the excipients I: Iron preparations, phosphate binders and other medicinal products with polyvalent cations as the main constituent, OAT1/OAT3 inhibitors, OAT3, CYP2B6, CYP2C9, CYP3A4, CYP2C8 substrates, BCRP substrates and certain statins **AE:** hypertension, diarrhoea, thromboembolic events, headache, seizures, hypotension, vascular hypersensitivity, cough, constipation, nausea, vomiting, elevated liver enzymes, elevated bilirubin in the blood **List:** A. **MAH:** Salmon Pharma GmbH, Basel. Detailed information at www.swissmedicinfo-pro.ch (08.2024). PRM-1444-EN-v1, Dec. 2025

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Friday, December 5, 2025 – 12.15–13.00
Room «Theatersaal»



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AstraZeneca AG
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Room «Ballsaal»



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Room «Ballsaal»



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Thursday, December 4, 2025 – 14.30–15.15
Room «Theatersaal»



Spirig HealthCare AG
Friday, December 5, 2025 – 14.00–14.45
Room «Ballsaal»



Swedish Orphan Biovitrum AG
Friday, December 5, 2025 – 12.15–13.00
Room «Ballsaal»

■ | Awards 2025 / SGN-SSN



Publication Award

CSL Vifor

Poster Awards



YSN Awards

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We would like to invite you to the

58th Annual Meeting of the Swiss Society of Nephrology SGN-SSN
on **December 3–4, 2026** – **Kursaal Bern**



Please save the dates of December 3–4, 2026!

We look forward welcoming you in Berne next year!



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- independent of gender, genotype or phenotype¹⁻³



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Fabrazyme® is indicated as enzyme replacement therapy for patients with Fabry disease (alpha Galactosidase A deficiency).⁶

^{*} from 8 years old

1. Ortiz A et al., Mol Genet Metab 2018;123(4):416-427. **2.** Wraith JE et al., J Pediatr 2008;152:563-570. **3.** Ortiz A et al., J Med Genet 2016;53(7):495-502. **4.** Banikazemi M et al., Ann Intern Med 2007;146(2):77-86. **5.** Germain DP et al., J Med Genet 2015;52(5):353-358. **6.** Fabrazyme® professional information February 2024, www.swissmedinfo.ch.
All references can be provided upon request.

Fabrazyme®. API: Agalsidase Beta. **I:** Enzyme replacement therapy for patients with Fabry disease (alpha Galactosidase A deficiency). **D:** 1 mg/kg body weight, once every two weeks as an intravenous infusion. The initial infusion rate should not exceed 0.25 mg/min (15 mg/hour). **Ct:** Life-threatening hypersensitivity (anaphylactic reaction) to any of the components. **PC:** It is to be expected that almost all patients will develop IgG antibodies against agalsidase beta within a period of three months. There will then be an increased risk of infusion-induced reactions. Special care is necessary in cases of repeated application. In case of infusion-related reactions, the infusion rate may be reduced and antihistamines, paracetamol, ibuprofen, and/or corticosteroids may be administered previously. In the event of severe acute reactions, discontinue treatment immediately and begin appropriate medical treatment. The efficacy of Fabrazyme on the kidney function of patients with advanced kidney damage may be impaired. **IA:** Do not administer in combination with chloroquine, amiodarone, benoquin, or gentamicin due to possible inhibition of intracellular alpha-galactosidase activity. **AE:** headaches, paraesthesia, nausea, vomiting, chills, fever. **P:** 35 mg: 1 vial per box, 5 mg: 1 vial per box. **DC:** A: **MAH:** sanofi-aventis (switzerland) ag, 1214 Vernier/GE. **Last Updated:** February 2024. For further information visit <http://www.swissmedinfo.ch/>.

