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On behalf of the ISPN editorial board I extend greetings to all of you! ISPNCON 2024 was conducted at New Delhi from 6th - 8th December at Hotel Lalit. We bring you snapshots of the Conference. ISPNCON 2025 is being conducted on 28th - 30th November at Jaipur, India, and request you all to join the conference. ISPN members continue to impart training and education in different parts of the country. Some of our members are working full time in remote areas. We bring you the story of such a doctor in this issue.

Numerous conferences and workshops have been conducted by ISPN members and we bring you glimpses of some of them. Our members bring you inspiring stories of little survivors post transplantations.

I thank all the members of the *Editorial board* who have worked hard to bring the issue, and also to all the members of ISPN for writing articles for this issue, all what matters the most is that we work as a TEAM.

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ISPNCON 2025

37th Annual Conference of The Indian Society of Pediatric Nephrology

29-30 NOVEMBER 2025

Mahatma Gandhi Medical College & Hospital, Jaipur

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Dr. Amarjeet Mehta

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Category	Early Bird (Till 30 th June)	1 st July - 31 st Oct	1 st Nov - 25 th Nov	On spot
ISPN Member	INR 6500	INR 7000	INR 7500	INR 9000
Non Member	INR 7000	INR 7500	INR 8000	INR 9500
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Nurses/ Technicians	INR 3000	INR 3500	INR 4500	INR 6500
Accompanying Person	INR 6000	INR 6500	INR 7500	INR 8500

Note: Includes both conference & workshop registration



<https://ispncon2025jaipur.com/>

info@ispncon2025jaipur.com

Ph. : 7742631165 • 7999477748

**For
Registration**





In this section we provide you important academic and administrative information from ISPN secretariate. In this issue we have compiled the activities conducted on World Kidney Day around India and important announcements.

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In this section we bring to you the activities conducted across various centres in India and announcement of upcoming events.



ISPNCN 2024

36th Annual Conference of

The Indian Society of Pediatric Nephrology

The 36th Annual Meeting of the Indian Society of Pediatric Nephrology (ISPNCN 2024) was hosted in New Delhi from 06th- 08th December 2024. The pre-conference workshop was conducted on 6th December 2024 with five interesting topics focused on critical care nephrology, kidney transplantation, bladder disorders, diagnostics in pediatric nephrology and research protocol development. Pediatric nephrologists and fellows from institutes across the country attended the workshops and were benefitted with the knowledge from experienced faculty members. The two-day conference was packed with a diverse range of academic activities. It included lectures, plenary sessions, panel and interactive discussions and deliberations led by highly skilled experts across the globe. Dr Fransesco Emma, Dr Stephen Marks and Dr Ruksana Shroff came over and delivered the plenary sessions. The program was inaugurated with the dignitaries Dr. Emma, Prof. Arvind Bagga, Dr. P K Pruthi, Prof. Mukta Mantan, Prof. Abhijeet Saha with a lamp-lighting ceremony.

Prof. Uma Ali and Prof. Kishore Phadke were felicitated with the lifetime achievement award for their tremendous contribution towards pediatric nephrology in India. Students and fellows enthusiastically participated in the poster presentation expressing their interest towards research and academics. Approximately 150 free papers were presented during the conference. Award papers and PG thesis presentations were given oral platform to showcase their research activities. Final round of the ISPNCN postgraduate quiz was also conducted with one team each representing the zones. Students participated with enthusiasm and it was a nail-biting quiz expressing the hidden interest of young



residents towards pediatric nephrology. The conference was smoothly organized by the pediatric nephrologists in and around Delhi NCR. The conference ended with guideline discussion for common pediatric nephrology conditions which highly benefitted pediatricians as well. Below are the few snaps during the program.



*Dr. Srinivasavaradan Govindarajan
VMMC & Safdarjung Hospital, New Delhi*



Nutrition in Pediatric and Adolescent CKD (NUTRI-PACK CME -2024)

On December 10th, 2024, a CME event titled “NUTRI-PACK: Nutrition in Pediatric and Adolescent CKD” was organized by Dr. Arpana Iyengar and Dr. Sukanya Govindan at St. John's National Academy of Health Sciences in Bengaluru. The CME was supported by the International Pediatric Nephrology Association, Pediatric Renal Nutrition Task Force, Indian Society of Pediatric Nephrology, and the Indian Association for Parenteral and Enteral Nutrition, Bengaluru chapter.

The event saw participation from 60 attendees, including pediatric nephrologists, dietitians, nutritionists, and trainees from premium academic institutions. The program's highlights included hands-on skills training for diet and nutrition assessment, diet prescription, and interactive case-based discussions. A significant outcome of the CME was the inauguration of the PRiNT booklets, which provide information on the dietary potassium content in Indian foods, and the release of a ready reckoner. The CME featured international experts, including Dr. Rukshana Shroff, Dr. Fabio Paglialonga and Ms. Nonnie Polderman and prominent National faculty including Uma Ali, Gurdeep Kaur, and Roshan Kore among others. The practical stations provided hands-on learning experiences covering diet assessment, Nutrition assessment, and prescription components.



Professor Arpana Iyengar

St. John's National Academy of Health Sciences, Bengaluru



Paediatric Nephrourocon series IV

The fourth annual Paediatric Nephrourocon series concluded on April 26th, 2025, at Kauvery Hospital, Radial Road, Chennai. This highly anticipated event, organized by Dr. G. Sangeetha, successfully brought together a diverse group of medical professionals, including pediatricians, pediatric nephrologists, pediatric intensivists, and pediatric urologists. The two-day conference offered a comprehensive exploration of critical topics in pediatric nephrology and urology. Day one featured a series of insightful lectures covering acute kidney injury (AKI), neonatal AKI, dyseletrolytemia in children, and the various kidney replacement therapies (KRTs) available for pediatric patients. The afternoon sessions provided delegates with invaluable hands-on demonstrations and case-based discussions on essential dialysis modalities, including peritoneal dialysis, hemodialysis, sustained low efficiency dialysis, continuous renal replacement therapy, and troubleshooting techniques in various modes of dialysis. Day two of the educational sessions delved into a range of crucial pediatric nephrology subjects. Discussions focused on urinary tract infections (UTIs), nephrotic syndrome, hemolytic uremic syndrome, cystic kidney diseases, and chronic kidney disease (CKD), among other pertinent topics.



Dr. G Sangeetha
Kauvery Hospital, Chennai



IPNA endorsed Webmaster series 2025 – Pediatric Chronic Kidney Disease

The IPNA-endorsed Webmaster series, a collaborative online course focusing on practical aspects of pediatric chronic kidney disease (CKD), concluded its fifth successful year in May 2025. This series, originally launched during the COVID-19 pandemic, featured six weekly webinars held from April to May 2025. Jointly organized by the Department of Pediatric Nephrology, Mehta Multispeciality Hospital, Chennai, India, and the Children's Hospital of Michigan, USA, the course was directed by Dr. Kalaivani Ganesan and Dr. Amrish Jain. It received support from the International Pediatric Nephrology Association (IPNA), the Indian Society of Pediatric Nephrology (ISPN), the Indian Academy of Pediatrics (IAP) Tamil Nadu State chapter, TANKER Foundation, and Mehta Multispeciality Hospital. The series featured a distinguished international faculty, including Dr. Joseph Flynn, Dr. Franz Schaefer (President, IPNA), Dr. Caroline SY, Dr. Melissa Gregory, Dr. Roshan P George, and Dr. Sharon Teo. To enhance engagement, the course included an interactive poll quiz for trainees with cash prizes and offered CME credit hours to Indian medical professionals. Kindly note: All webinar recordings are available on YouTube and at www.childrenkidneycare.com.



Dr. Kalaivani Ganesan
Mehta Multispeciality Hospital, Chennai



Young Kidneys 2025

The third annual Young Kidneys 2025 conference, a dedicated non-profit event for pediatric nephrology, successfully concluded on July 5th and 6th, 2025. This year's theme, "Pediatric Nephrology-From Basic to Advanced Care," underscored its commitment to integrating fundamental knowledge with the latest advancements in the field. Dr. Kalaivani Ganesan, Head of the Department of Pediatric Nephrology at Mehta Multispeciality Hospital, Chetpet, Chennai, is the Organising Secretary of the event. The conference, commenced with a pre-conference workshop on Continuous Kidney Replacement Therapy (CKRT) on Day 1. This was followed by a comprehensive CME program on Day 2.

A significant highlight of Young Kidneys 2025 was the 3rd Annual Dr. Georgi Abraham Oration. This oration honours Dr. Georgi Abraham, a pivotal figure in Indian nephrology, renowned for establishing the TANKER Foundation and performing India's first deceased donor transplantation. We were honoured to host Dr. Prasad Devarajan from Cincinnati Children's Hospital, USA, who delivered this prestigious oration during our CME. The event was further distinguished by the presence of Dr. Venkataramani Sumantran, Chairman of Celeris Technologies and former Chairman of Indigo, as our Chief Guest. Building on the successes of Young Kidneys 2023 and 2024, which featured esteemed speakers such as Dr. Sanjeev Gulati, Dr. Arvind Bagga, and keynote speaker Dr. Tej Mattoo (Professor of Pediatrics and Urology, Wayne State University School of Medicine, Detroit, USA), Young Kidneys 2025 continued its vital mission to promote excellence and inspire progress within the pediatric nephrology community.



*Dr. Kalaivani Ganesan
Mehta Multispeciality Hospital, Chennai*





Conference Summary: IPNA–AsPNA Junior Master Class in Pediatric Nephrology, AIIMS New Delhi (4–6 April 2025)

The Division of Nephrology, Department of Pediatrics, All India Institute of Medical Sciences (AIIMS), New Delhi, in collaboration with the International Pediatric Nephrology Association (IPNA) and the Asian Pediatric Nephrology Association (AsPNA), successfully organized the Junior Master Class in Pediatric Nephrology from 4th to 6th April 2025. The event brought together nearly 250 participants, including young nephrologists, pediatricians, fellows, dietitians, and nursing staff, representing a vibrant mix of national and international delegates. Over three days, the meeting provided a rich academic program, blending guideline-based updates, cutting-edge research, and discussions on evolving therapies for kidney diseases in children.

Pre-Conference Highlights (4 April 2025)

The event commenced with a **pre-conference program** that focused on two parallel themes. The first was a **guideline meeting on antenatal hydronephrosis**, covering antenatal and postnatal evaluation, surgical management, and open discussions on standardizing care pathways. Simultaneously, a dedicated **nutrition session** was held for dietitians and nursing staff, emphasizing nutritional assessment, recognition of protein-energy malnutrition, indications for supplementation, dietary management of electrolyte abnormalities, and the use of the DASH diet in hypertensive children with chronic kidney disease (CKD). This initiative underscored the importance of multidisciplinary approaches in pediatric nephrology care. The day concluded with a **Fellows’ Symposium**, reflecting on “Two decades of training through IPNA support.” Speakers discussed the growth and challenges of pediatric nephrology training worldwide, including IPNA fellowships, DM programs, opportunities for short-term training, and the role of adult-pediatric collaborative programs. The session highlighted the strengths of existing models while identifying avenues for innovation in training future specialists.



Day 1 (5 April 2025): Nephrotic Syndrome, Glomerular Diseases, and Innovations

The first formal day of the Master Class opened with remarks from the organizers, followed by a pre-test assessment.

- Symposium I addressed nephrotic syndrome, with talks on pathogenesis, management of relapsing cases, and approaches to steroid-resistant disease. Discussions emphasized novel immunomodulatory therapies and the need for long-term outcome studies.
- Symposium II focused on complement-mediated kidney diseases, including thrombotic microangiopathy with reference to IPNA guidelines, lupus nephritis, and C3 glomerulopathy. Speakers highlighted both diagnostic advances and emerging therapeutic options.
- Symposium III examined glomerulonephritis, covering infection-related disease, crescentic GN with evidence-based updates, IgA nephropathy/IgA vasculitis, and a unique nationwide experience on anti-GBM nephritis.
- Symposium IV presented advances in management, where prolonged intermittent and continuous renal replacement therapies, B-cell depletion strategies in nephrotic syndrome, multicentric studies on acute kidney injury (AKI), and anti-proteinuric measures were reviewed.

The day concluded with research presentations from leading institutions across India, providing young investigators a platform to showcase their work and receive expert feedback. This interactive session highlighted the growing academic strength of pediatric nephrology in the region.

Day 2 (6 April 2025): Rare Diseases, Transplantation, and Tubular Disorders

The second day began with Symposium V on rare genetic and structural kidney disorders, including microscopic hematuria, hyperoxaluria, nephronophthisis, and autosomal dominant polycystic kidney disease (ADPKD). Advances in molecular diagnostics and implications for early detection were key themes.



- Symposium VI was dedicated to kidney transplantation, where experts addressed induction immunosuppression, antibody-mediated rejection, recurrent focal segmental glomerulosclerosis (FSGS), and viral infections such as BK virus and CMV. The discussions reflected global best practices contextualized for pediatric populations.
- Symposium VII reviewed CKD and evolving consensus, including the role of genetics in pediatric CKD, anemia pathophysiology and management, and strategies for mineral bone disease. Speakers emphasized the importance of multidisciplinary care and the integration of genetic insights into clinical practice.
- Symposium VIII covered tubular disorders, including hypophosphatemic rickets, hypokalemic metabolic alkalosis, monogenic hypertension, and renal tubular acidosis. These sessions offered participants a comprehensive review of rare but clinically significant conditions, supported by recent guideline recommendations.

The meeting concluded with a post-test and closing remarks, reinforcing the knowledge gained and the collaborative spirit of the Master Class.

Overall Significance

The IPNA–AsPNA Junior Master Class in Pediatric Nephrology at AIIMS New Delhi was notable for its comprehensive scientific content, interactive discussions, and the active participation of nearly 250 delegates. The mix of international and national faculty provided diverse perspectives, ensuring the program addressed both global standards and regional priorities. Importantly, the conference emphasized translational learning from guidelines to bedside practice and provided a platform for young professionals to engage with senior experts.

With its focus on nephrotic syndrome, glomerular diseases, transplantation, CKD, and tubular disorders, alongside specialized sessions on nutrition and antenatal management, the event reflected the breadth of



pediatric nephrology. The fellows' symposium and research presentations further strengthened the community's commitment to capacity building and academic excellence.

In summary, this Master Class not only enriched participants with the latest knowledge but also reinforced collaborative networks across Asia and beyond, ensuring better care for children with kidney diseases.



Dr. Srinivasavaradan Govindarajan
VMMC & Safdarjung Hospital, New Delhi



UTI and VUR Workshop, AIIMS, Kalyani

AIIMS Kalyani hosted an engaging full-day CME on 8th March 2025, focusing on UTI and VUR. A total of 60 participants attended the CME. The event featured expert-led sessions on the latest advancements in diagnosis and treatment, including the latest ISPN guidelines on UTI and VUR. Practical demonstrations included POCUS on KUB and a kidney biopsy on a cadaver. Dr. Giovanni Montini from Milan, Italy was amongst the faculties.



Dr. Shubhankar Sarkar
AIIMS, Kalyani



Nephrology Workshop, East Zone Pedicon, Kolkata

The 2024 East Zone PEDICON was hosted in Kolkata on 21st- 22nd December 2024. The pre conference workshop on Nephrology was conducted by West Bengal State Chapter of the Indian Society of Pediatric Nephrology in collaboration with ISPN and central IAP, which was module based training in nephrotic syndrome incorporating current ISPN guidelines. The workshop was well attended with 14 state faculty members from BSPN and 3 national faculty (Dr Anand Gupta, Dr Subal Pradhan, Dr Arpita Gogoi). Workshop was smoothly coordinated by Dr Sumantra Raut, Dr Somnath Gorain and Dr Dibyendu Ray Chaudhury. The workshop ended with an interactive posttest and doubt clearance of delegates.



Dr. Sumantra Raut

North Bengal Medical College, Siliguri, West Bengal



1st Pediatric Dialysis and Therapeutic Apheresis Module for Emergency (PD-TAME 2025)

1st Pediatric Dialysis & Therapeutic Apheresis Module for Emergency was held on June 14th -15th at Lady Hardinge Medical College & Kalawati Saran Children's Hospital, New Delhi. The Facilitator's Guide and Participant's Guide (Editors Dr OP Mishra, Dr Abhijeet Saha) were released by Dr Anju Seth, Principal LHMC in presence of Dr Praveen Kumar, HOD Pediatrics, Dr OP Mishra, Ex ISPN President, Dr Mukta Mantan, President ISPN, and Dr Abhijeet Saha, General Secretary ISPN. Inaugural lecture on 'Principles of Management of AKI' was delivered by Dr Arvind Bagga (Professor Emeritus, AIIMS, New Delhi and Secretary General, Asian Society of Pediatric Nephrology).

The program featured all aspects of Pediatric Dialysis:

- Principles of Management of AKI
- Acute Peritoneal Dialysis

- Acute vascular access
- Hemodialysis (HD)
- Continuous Kidney Replacement Therapy (CKRT)
- Sustained Low-Efficiency Dialysis (SLED)
- Automated Peritoneal Dialysis
- Therapeutic Apheresis
- Mechanical Ventilation in Children with AKI
- Neonatal AKI

All sessions were conducted in alignment with international guidelines and included guest faculty from:

- AIIMS, New Delhi
- Lady Hardinge Medical College, New Delhi
- St. John's Medical College, Bengaluru
- Gangaram Hospital, New Delhi
- HIMS, Varanasi
- Maulana Azad Medical College, New Delhi
- University College of Medical Sciences & GTB Hospital, New Delhi



- CNBC, New Delhi
- Command Hospital, Chandigarh
- Command Hospital, Kolkata

Total 48 participants from North India attended the 1st PD-TAME



Dr. Abhijeet Saha
LHMC & KSCH, New Delhi



ISPN Fellowship Exam: 2025 Results and 2026 Schedule

The ISPN successfully conducted its annual fellowship examination in January 2025 at CMC, Vellore. The exam, overseen by Fellowship Committee Chair Dr. Indira Agarwal and Deputy Chair Dr. Sudha Ekambaram, saw 11 candidates participate. Candidates hailed from various institutions across India, with two each from Wadia Children's Hospital, Mumbai, and Mehta Children's Hospital, Chennai. KEM Pune, IKRDC Ahmedabad, ICH Kolkata, and Little Star Hospital, Hyderabad, each had one candidate. Additionally, one candidate each from Gangaram Hospital, Delhi, St. John's Medical College Hospital, and Rainbow Children's Hospital, Bengaluru, took the Certificate exam. A remarkable 10 out of 11 candidates successfully cleared the examination.

Looking ahead, the January 2026 ISPN fellowship exam will be held at Lady Hardinge Medical College, Delhi. Six candidates have already registered. The registration deadline for the Certificate exam has been extended until July 31st. Further details can be found on the ISPN website



*Dr. Sudha Ekambaram
Apollo Children's Hospital, Chennai*



Annual Conference of the West Bengal State Chapter of the ISPN 2025

The annual conference of the West Bengal Chapter of ISPN was held on 7th & 8th June, 2025 at Kolkata. ISPN President Dr Mukta Mantan (Director-Professor, Department of Pediatrics, Maulana Azad Medical College, New Delhi), Dr NG Kar Hui (Associate Professor, Division of Pediatric Nephrology, National University of Singapore) and Dr Mehul Shah (Senior Consultant Pediatric Nephrologist, Apollo Hospitals Hyderabad) were amongst the faculties. The first day started with a session on updates on the management of glomerular diseases in children. The second day kickstarted with oral paper presentations followed by interactive case-based, algorithm-driven discussions of various kidney diseases in children. It was attended by over 200 delegates from all over West Bengal, who engaged whole heartedly in the discussions, and also participated actively in the ensuing quiz at the end of the day's event. The response was overwhelming with delegates going back home with a booklet summarising the algorithms and the key take aways of the academic sessions.



*Rajiv sinha
Institute of Child Health
Division of Pediatric Nephrology
Kolkata*



Little Survivors

This section highlights the stories of children with kidney disease who have faced their disease boldly and emerged successful.



*Dr Kinnari Vala
IKRDC, Ahmedabad*

Hope and Resilience: Little Transplant Warriors

As a Pediatric Nephrologist we are all aware that kidney transplantation (KT) is the most optimum mode of Kidney replacement therapy for children with End Stage Kidney Disease (ESKD). Unfortunately providing KT for these children is challenging with multiple obstacles including finance, donor availability and requirement of both medical and surgical transplantation related expertise. We hereby briefly bring you the story of 2 of our recent fighters who successfully underwent KT.

Case 1

A 9 year old female presented with severe respiratory distress and cardiac failure (ejection fraction 15%). She was diagnosed with ESRD (rapidly progressing glomerulonephritis of unknown origin). She underwent SLED followed by intermittent hemodialysis. Her ejection fraction started improving and by 9 months it was 65%. She was ready for KT but the family had spent all their reserves. We initiated crowd funding and after a wait of over a year she was transplanted at the age of 11 years and weight of 15.5 Kg. She also underwent cochlear implant for severe bilateral sensory neural deafness probably secondary



to her difficult days on haemodialysis with frequent infections and requirement for antibiotics. Now she can hear properly, creatinine has normalised and she has recommenced schooling.

Case 2

A 5 year old male presented with hypertensive emergency and was found to have ESKD secondary to autosomal recessive polycystic kidney disease. Subsequently after being on peritoneal dialysis for a year he underwent KT at the age of 6 ½ years with a weight of 12 kgs. Although his graft function remained stable after 3 years he started having recurrent cholangitis secondary to his liver disease. This necessitated liver transplantation at 10 years of age. Currently at 17 years he recently passed Class 10 board and is actively pursuing his studies. Both his liver and kidney graft are working fine. It has been a constant fight for his parents. His father works as a security personnel in a private security firm and it has been only through generous support of NGO's that the family has been able to sustain financially.

Case 1



Case 2



*Rajiv Sinha , Shakil Akhtar, Deblina Dasgupta, Sanjukta Poddar, Rifah Khan
Institute of Child Health
Division of Pediatric Nephrology
Kolkata*



Pediatric Nephrology Reaching the Corners of India

Returning Home — A Journey in Pediatric Nephrology



*Dr Nayan Chaudhari
Amravati, Maharashtra*

My pediatric nephrology story kicked off at KEM Hospital, Pune, and found wings at IKDRC, Ahmedabad, through the IPTA Outreach Fellowship. While these institutes shaped me academically and professionally, thanks to my wonderful mentors at each stage, I often found myself reflecting on a simple but powerful question:

Where will my work make the most impact?

The answer was always close to my heart — home.

Having grown up in Yavatmal, I understood firsthand the gaps in specialized pediatric care in such regions. Returning to Amravati, a small city in Maharashtra, felt like more than a personal decision — it felt like a responsibility. What solidified my resolve was learning that the last peritoneal dialysis performed here was over a decade ago. That wasn't just a statistic — it was a wake-up call.

Our goal has been simple yet profound: to make pediatric nephrology accessible, available, and approachable — not just in Amravati, but in the surrounding rural and semi-urban areas as well. So we rolled up our sleeves and got to work:

Health camps, seminars, community talks, quizzes, and peripheral OPDs became our tools. Slowly and steadily, we've expanded access to services like peritoneal dialysis, hemodialysis, biopsies, and plasmapheresis for children in the region.

But the real win? Breaking the deep-rooted belief that "dialysis = death."

We've even taken a bold step ahead — two successful living-related pediatric kidney transplants done in-house at a government facility.

Pediatric nephrology may be a superspecialty, but in places like Amravati, it's nothing short of a necessity.

This work has only reaffirmed my belief that pediatric nephrology needs to be accessible, regardless of geography. There's still much work to be done, but I remain committed to growing — as a clinician, as a student of the field, and as a member of this community. With the continued guidance of my mentors and support from the local healthcare system, I intend to keep learning, keep growing, and continue making a difference — one patient at a time.





Clinical Quiz

In this section we describe interesting cases with some important teaching points. In this issue we have used two formats. Do send me emails, which format do you like.



Dr. Darshan R

Section Editor
Dr. SUMANTRA KUMAR RAUT



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Polydipsia–Polyuria Dilemma in a Child with Syndromic Clues

Dr. Darshan R, Fellow Pediatric Nephrology, AIIMS Jodhpur

A 7-year-old boy presented with complaints of decreased vision noticed from 4 years of age, and increased frequency of micturition for the past 1 year. Parents reported excessive water intake (>2 L/day) and night awakenings twice to pass urine with a 24-hour volume of 2.1L/m²/day. History revealed surgery for hypospadias at age 1 year. On examination, the child had bilateral squint, horizontal gaze nystagmus, and was otherwise systemically normal. Anthropometry was within normal limits. Ophthalmologic evaluation revealed bilateral amblyopia and optic disc pallor; however, his vision was as follows: right eye, 6/12, and left eye, finger counting at 1 ½ meters. Hearing was normal. Laboratory evaluation revealed normal renal function, electrolytes, and acid-base status. Early morning urinary pH was 5.2. Twenty-four-hour urine collections showed no proteinuria, hypercalciuria, or significant electrolyte loss; vitamin D was low. Serum and urine osmolarities were 282 and 96mOsm/kg, respectively, raising suspicion of diabetes insipidus (DI).



Questions

1. In this child to rule out central involvement, what radiological investigation would you order, and what key findings would you look for?
2. Given that Central DI is unlikely, what would you do next in this child?
3. What is the most likely differential diagnosis for this child's presentation?
4. What could be the cause of Polydipsia and polyuria in the index case?



Answers

Answer 1

Considering ocular changes with genitourinary abnormality, MRI brain with dedicated pituitary protocol (sagittal and coronal T1-weighted images before and after contrast, plus T2-weighted sequences) should be considered to rule out central DI.

- Normal reference points:

1. Anterior pituitary:

2. Normally hypointense on T1WI and T2WI.

3. In neonates, T1WI hyperintense signal (bright) decreases to normal hypointensity by 2 months.

4. Median height in children: 6 mm; increases in adolescence (max 10 mm girls, 8 mm boys).

5. <3 mm height suggests hypoplasia.

6. Contour can be upwardly convex during puberty (normal).

- Posterior pituitary:

1. Usually T1WI hyperintense (bright “posterior pituitary bright spot”). Loss of this signal may indicate central DI.

- Pituitary stalk:

1. Assess for thickness, continuity, and contrast enhancement. Thickened or interrupted stalk may suggest inflammatory, neoplastic, or developmental pathology.

In our case, the MRI brain showed bilateral symmetrical mild optic atrophy with a normal posterior pituitary bright spot and normal height of pituitary, with a normal stalk.

***Answer 2***

Formal water deprivation test with serial monitoring of serum and urine osmolarities, followed by desmopressin challenge if needed.

A formal water deprivation test was done in our child, and urine osmolarity >800 mOsm/kg was achieved, ruling out DI.

Answer 3

Genetics consultation in our child suggested the possibility of *Septo-optic dysplasia (SOD) sequence*, which is characterized by optic nerve hypoplasia, pituitary gland hypoplasia, and midline abnormalities of the brain; however, the triad might not be fulfilled in all cases, and pituitary involvement can occur later in time.

Answer 4

Psychogenic polydipsia is a possibility; however, primary polydipsia due to hypothalamic dysfunction is a recognized feature of the SOD sequence.

In our index kid, a clinical exome with screening for other pituitary hormone deficiency has been planned.



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