

CKD-MBD related publications in the ERA journals From July to December 2025

The ERA recognizes the high clinical and scientific relevance of CKD-MBD syndrome, as reflected in several key publications in our society's journals. Here, we summarize the content of recent papers and provide links to their abstracts, full texts, or electronic publications (Epub) ahead of print.

From July to December 2025, only 10 CKD-MBD-related articles -including 1 correction and E-pubs ahead of print- were published: 3 in *Nephrology Dialysis Transplantation* and 7 in the *Clinical Kidney Journal*.

- 1) Regarding **biomarkers**, **I. Campos and C. Faul** ([Nephrol Dial Transplant 40 \(7\):1294–1309](#)) discuss in an editorial how elevations in extracellular **phosphate** levels could potentially affect cells and intracellular reactions and functions in general, later zooming in the heart and myocardial calcification. **T. Saito et al.** ([Clin Kidney J 18 \(6\): sfaf151](#)) analysed the association of serum phosphate levels and statin use with cardiovascular events in Japanese patients on chronic haemodialysis. This article was a *post-hoc* analysis of the LANDMARK trial and concluded that time-dependent statin use was associated with a lower risk of all-cause death. However, statin and serum phosphate levels were not significantly associated with lower risk of cardiovascular events or mortality. A correction was published in *Nephrology Dialysis and Transplantation* ([Nephrol Dial Transplant 40 \(8\):1637](#)) regarding a previous publication on “**hypocalcemia** and cardiovascular mortality in cinacalcet users” by **S. Goto et al.** ([Nephrol Dial Transplant 39 \(4\): 637-647; 2024](#)). Following the notice issued by the Japanese Society for Dialysis Therapy (JSDT) on March 18, 2025, recommending that researchers not use the term ‘prospective’ for studies using the JSDT Renal Data Registry, it was stated that the word ‘prospective’ should be removed from the description of the study. **S. Stabouli et al.**, on behalf of the 4C Study Consortium and the ESPN CKD-MBD Working Group ([Clin Kidney J 18 \(9\): sfaf231](#)) reported the association of long-term growth hormone treatment with improved circulating **Klotho** and reduced arterial stiffness in children with CKD. **J.A. Neyra et al.** ([Clin Kidney J 18 \(6\): sfaf144](#)) described the relationship between **magnesium intake** and decline in kidney function (\downarrow), incident CKD (\downarrow) and incident cardiovascular disease (no effect) in a large cohort of older adults.
- 2) In regard to **osteoporosis**, **N. Henry et al.** ([Clin Kidney J 18 \(10\): sfaf228](#)) summarised the current understanding of and recommendations for the diagnosis and management of osteoporosis in CKD and provides a pragmatic approach to fracture risk assessment and reduction in this population. A Consensus Statement on the management of Vertebral Fractures in CKD stages G4-G5D was published in advanced form by **M. Fusaro et al.** ([Nephrol Dial Transplant 2025: gfaf256](#)) as an initiative of the SKeletal fragility–Chronic Kidney Disease: SKY-CKD IOF working group (SKY-CKD IOF WG) and on behalf of the European Society for Clinical and Economic Aspects of Osteoporosis, Osteoarthritis and Musculoskeletal Diseases (ESCEO), in collaboration with the CKD-MBD Working Group of the ERA and European Renal Osteodystrophy (EUROD). Authors comprehensively discuss the management of skeletal fragility in CKD patients, from diagnosis to treatment, with a particular focus on vertebral fractures in CKD G4–G5D.
- 3) **S. Huish et al.** published a comprehensive update of calciphylaxis diagnosis, management and future directions on behalf of our CKD-MBD Working Group ([Clin Kidney J 18 \(12\): sfaf338](#)). Moreover, **M. Theodorakopoulou and B. Meijers** ([Clin Kidney J 18 \(7\): sfaf193](#)) analysed what’s next after the CALCIPHYX trial in regard to its impact on the complex calciphylaxis treatment.

4) Finally, M. Elshayeb et al ([Clin Kidney J 19 \(3\): sfaf384](#)), also previously published in advanced form, reported a randomized, double-blind, placebo-controlled study on the neutral impact of **dapagliflozin on bone mineral metabolism** in non-diabetic patients with CKD.

Interestingly, the contents of the 62nd ERA Congress 2025 (4-7 June) can be found in the [2025 Nephrol Dial Transplant Issue Supplement # 3 \(October 2025\)](#).



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