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Advances in Chronic Kidney Disease as Syntopicon



Advances in Chronic Kidney Disease began its life under the aegis of Allen R. Nissenson as the first Editor-in-Chief of *Advances in Renal Replacement Therapy*.¹ Dr. Nissenson's expressed desire was for A-R-R-T to become the "art" of renal replacement therapy. He explicitly stated this aspiration, echoing the enthusiastic prose of Dr. Seuss, in his inaugural editorial in April 1994, "The ARRT of Uremia Therapy."¹ Instrumental to the journal's conception was much the effort of Garabed Eknoyan—a long-time advisor-contributor to the National Kidney Foundation in so many ways. He and others realized that the prominent journals in Nephrology had "orphaned" renal replacement therapy "for quite a while," and that change was required.² Topics regarding hemodialysis were its forte with peritoneal dialysis highlighted as well. James Winchester who had participated in ARRT's first Editor-in-Chief selection committee became the A-R-R-T's second Editor-in-Chief in January 1999. ARRT continued to publish high-quality manuscripts principally involving kidney replacement therapy. In January 2004, Dr. Winchester's successor, Wendy Brown, became the third Editor-in-Chief. She reincarnated the journal as *Advances in Chronic Kidney Disease* (A-C-K-D), which immediately and presagingly positioned it as a vehicle for timely, thematic reporting of issues, both old and new, within the burgeoning world of CKD. The title word, "Advances," was chosen to reflect the journal's evolution and progression to a rapidly enlarging nephrological platform.

During my 11-year tenure as A-C-K-D's fourth Editor-in-Chief, the journal has become a bimonthly meme of the clinical nephrologist's world. The editorial staff tasked itself with the lofty ideal of becoming the kidney-centric manifestation of the University of Chicago philosopher Mortimer Adler's compilation, *A Syntopicon: An Index to the Great Ideas*. Published as volumes 2 and 3 of *Encyclopædia Britannica's* collection "Great Books of the Western World," Adler patiently and unerringly compiled the fundamental precepts of 102 great minds from Homer to Freud.^{3,*}

A-C-K-D has presented a host of timely topics, *Great Kidney Ideas*. The editorial staff of A-C-K-D has responded 66 times to the challenge of presenting contemporary and specific problems in CKD in a reader-friendly format after

thorough and comprehensive peer review. The themes published encompassed multiple, specific areas of CKD, including its intersections with acute kidney injury, infections, glomerular filtration rate, electrolyte and acid-base disorders, glomerular disorders, intensive care nephrology, transplantation, hypertension, exercise, end-stage renal disease, toxins, viral nephropathies, and others. The Guest Editors judiciously canvassed their respective landscapes of expertise to cajole their respective authors into writing for A-C-K-D. In the end, the authors penned a finely crafted series of papers that influenced theory and practice ... and with great artwork.

In principle, this journal has become, to some extent, a renal syntopicon, whereby a few watched for the many. Namely, our expert, ever-vigilant, and multifaceted editorial board continually surveilled the renal landscape for nascent concepts that could become canon, or, at least, controversial.³ With our Guest Editors, the editorial staff stifled any of my own implicit biases, and offered high-quality, balanced work to our readers.

It has been an enormous privilege to guide, mentor, and learn from so many. The list is long and includes the ultra-professional staff of the medical publishing house, Elsevier, with special gratitude to Elsevier personnel, Kate Williamson, Sarah Pratta, and Livia Berardi as well as Kendra Clayton, Jason Woodson, Lisa Johnson, and Catherine Desko; the leadership of the National Kidney Foundation, with sincerest thanks to Jessica Joseph and

* Compiled by Mortimer Adler, an American philosopher, under the guidance of Robert Hutchins, president of the University of Chicago, the two volumes represent a compendium of the 102 Great Ideas of the Western canon. The term "syntopicon" was coined specifically for this undertaking, meaning "a collection of topics." The volumes cataloged what Adler and his team deemed to be the fundamental ideas contained in the works of the Great Books of the Western World, which stretched chronologically from Homer to Freud. The Syntopicon lists, under each idea, where every occurrence of the concept can be located in the collection's famous works.

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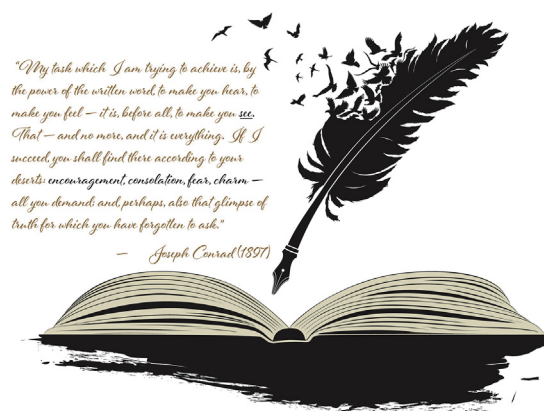
<https://doi.org/10.1053/j.ackd.2019.05.004>

Kerry Willis; A-C-K-D's ausgezeichnet Associate Editors, past and current; and nonpareil Editorial Board, all of whom sacrificed personal time to properly prepare each issue. External assistance was always "at-the-ready." Stephanie Stebens, MLIS, facilitated manuscript preparation, and helped us achieve our deadlines more times than I can recall. Medical writer, Sarah Whitehouse, MAW, proofread many papers with potential, and transformed them into publication-worthy manuscripts. Author, English teacher, and advisor James Kelly read nearly all my occasionally "semi-demagogic" editorials, and improved them with sage Mark Twain-like advice.

No amount of appreciation expresses the debt that this journal and I owe to our "Managing Editor," Dr. Nandita Mani, PhD, who indefatigably and graciously corrected this journal's course innumerable times. Her unparalleled ability to "dead reckon" permitted the recalculation of our course as required, and led us to this portion of A-C-K-D's journey. Without her untiring guidance, we would not have landed where we are now. I am confident that our current position, farther than we were but not yet where we must go, is a good one. I am equally certain as the journal passes into the highly capable hands of Dr. Charuhas Thakar, MD, and his Editorial Board that the panoptic syntopicon that *Advances in Chronic Kidney Disease* has become will continue its forward progress on multiple fronts.⁴

For now, Guest Editor, Sagar U. Nigwekar, MD, MMSc, elucidates in part the vexing disorder, calcific uremic arteriolopathy, or calciphylaxis to us oldsters who thought that this cutaneous catastrophe only afflicted individuals with end-stage renal disease. However, this terrifying and horribly painful skin disease has monstrously made its appearance in the non-CKD world, that is, calcific uremic arteriolopathy (CUA) has been repeatedly diagnosed in patients with normal glomerular filtration rates. Unfortunately, we do not yet know enough to prevent CUA, but more than a glimmer of hope is presented in this issue. So, readers, do what you do. Keep reading as this journal continues its dedication to

Awesome, Comprehensive Knowledge Dissemination. I will, and thank you.



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