AFRAN NEWSLETTER

SAVE THE DATE: 2027 AFRAN CONGRESS, 22 -25 JUNE, DAR ES SALAAM, TANZANIA



Zanzibar, about 1 hour from Dar Es Salaam: the host city of 2027 AFRAN CONGRESS

AFRICAN ASSOCIATION OF NEPHROLOGY
Leading Nephrology in Africa

WELCOME TO THE THIRD ISSUE OF THE AFRAN NEWSLETTER!

BY FAIÇAL JARRAYA, NEWSLETTER EDITOR

Dear Colleagues, Friends, and Members,

We are delighted to welcome you to the third issue of the African Association of Nephrology (AFRAN) Newsletter!

Our editorial team has worked enthusiastically to bring together the latest news, achievements, initiatives, and scientific activities from across the African nephrology community over the past few months. This issue reflects the vitality of our association, the commitment of our members, and our shared ambition to strengthen nephrology across the continent.

A special focus is dedicated to the forthcoming **AFRAN 2027 Congress in Dar es Salaam, Tanzania**, with a welcome message from the Congress Co-Chair, Professor Paschal Ruggajo, who introduces us to this major upcoming event.

Following the tremendous efforts of the AFRAN Transplantation Committee and the successful organization of its transplantation course jointly with Education Committee, Mohamed Mongi Bacha, Khadidja Habchi, and Mohammed Abdelgawad share with us the achievements and highlights of this important initiative.

Have you ever wondered who is behind the emails and calls you send to the AFRAN Secretariat? In this issue, our Secretariat team, represented by Lethisha Harilall, introduces its members, daily activities, and organizational work, while providing you with all the relevant AFRAN contact details to facilitate communication and respond to your enquiries.

We are also proud to celebrate one of AFRAN's founding members and distinguished mentors, **Prof. Mohamed Aziz El Matri**, AFRAN President from 1996 to 1998. Professor Taieb Ben Abdallah, our mentor and former AFRAN Secretary General, pays tribute to his remarkable achievements and lasting contribution to our association.

Following the historic success of the **first ISPD Congress ever held in Africa**, Nicola Wearne takes us back through some of the memorable moments and highlights of this landmark event.

As usual, we bring you updates on AFRAN's educational activities, with Mohamed Abdel Gawad reporting on our webinars and Yannick Nlandu highlighting recent scientific publications by African nephrologists.

This issue also shines a spotlight on nephrology in **Tanzania** and **Senegal**, celebrating the progress, people, and initiatives contributing to kidney care in these countries.

Finally, Razeen Davids highlights the importance of publishing in our own **African Journal of Nephrology**, emphasising the role of African scientific publications in sharing our research, strengthening our academic identity, and giving greater visibility to African nephrology.

The AFRAN Newsletter is more than a source of information; it is a platform for connecting colleagues, sharing experiences, celebrating achievements, and giving visibility to the remarkable work taking place across our continent.

Thank you for being part of this exciting journey. We hope you enjoy this third issue and find it both informative and inspiring.

Together, let us continue connecting nephrologists in Africa and connecting African nephrology to the world!

Warm regards,

Faiçal JARRAYA on behalf of the editorial board

2027 AFRAN CONGRESS: Advancing Kidney Health in Africa — Equity, Sustainability, and Innovation.

BY PASCHAL RUGGAJO, COCHAIR 2027 AFRAN CONGRESS

Tanzania warmly invites colleagues from across Africa and beyond to the 19th Congress of the African Association of Nephrology (AFRAN), taking place from 22 to 25 June 2027 at Mlimani City Conference Centre in Dar es Salaam. Held jointly with the 11th Nephrology Society of Tanzania (NESOT) Scientific Conference, the congress marks AFRAN's second gathering in East Africa, a milestone for regional collaboration and the advancement of kidney care.

Under the theme "Advancing Kidney Health in Africa: Equity, Sustainability, and Innovation," AFRAN 2027 will bring together nephrologists, researchers, nurses, allied health professionals and trainees to exchange knowledge, share experience and strengthen partnerships. Discussions will explore how African health systems can expand access to kidney care while developing sustainable services and embracing innovations suited to local needs.

The provisional scientific programme includes plenary lectures, parallel symposia, research presentations and practical workshops. Topics span dialysis, transplantation, chronic kidney disease, hypertension, paediatric nephrology, glomerular diseases, critical care nephrology, and prevention. The congress offers an opportunity to connect clinical practice with research and to support the next generation of African kidney health professionals.

Delegates are encouraged to register early. Early-bird registration runs through 31 December 2026, with fees of USD 300 for AFRAN members, USD 350 for other delegates and USD 200 for trainees. Standard rates apply from 1 January to 30 April 2027, followed by late and on-site rates from 1 May..

Abstract submission is provisionally scheduled to open on 1st November 2026 and close on 28th February 2027. Researchers are encouraged to prepare their contributions and monitor the congress website for updates.

Please plan accommodation early and reserve hotel rooms promptly once booking arrangements are confirmed, allowing greater choice of location and budget.

Beyond the scientific programme, delegates can experience Tanzania's coastal hospitality, cultural heritage and natural beauty. We look forward to welcoming you to Dar es Salaam for four days of learning, collaboration and shared commitment to better kidney health.

Visit **www.afran2027.com** for registration, program and travel updates

2029 AFRAN CONGRESS

The 2029 AFRAN Biennial Congress will be held in a Francophone African country**.**

We are delighted to announce that four countries have expressed their interest in hosting the congress and have submitted formal letters of intent. We are very pleased and encouraged by the strong interest and enthusiasm of our colleagues in organizing this important AFRAN meeting.

The **AFRAN Nomination Committee**, working independently from the Board, has already started the selection process to identify the most suitable potential host city for the **2029 AFRAN Biennial Congress**. The final selection will then be submitted to the AFRAN Board for validation.
The selected city will be officially announced in **AFRAN Newsletter No. 4**.

YOU READ IN THIS ISSUE. . .

AFRAN 2027 DAR ES SALAAM CONFERENCE: ADVANCING KIDNEY HEALTH IN AFRICA — EQUITY, SUSTAINABILITY, AND INNOVATION

AFRAN ONLINE KIDNEY TRANSPLANTATION COURSE: A COLLABORATIVE EDUCATIONAL JOURNEY

THE AFRICAN JOURNAL OF NEPHROLOGY: A NEW HOME, AND A GROWING ARCHIVE.

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AFRICAN ASSOCIATION OF NEPHROLOGY NEWSLETTER
Number 3 / 2026

AFRAN NEWSLETTER

AFRAN COMMITTEE ACTIVITIES

AFRAN Transplant Committee: From strategic vision to concrete action

BY MOHAMED MONGI BACHA
TRANSPLANTATION COMMITTEE CHAIR

The AFRAN Transplant Committee is committed to advancing organ donation and transplantation across Africa through collaboration, research, education and capacity building. It works to improve access through local expertise, ethical practice, knowledge exchange and sustainable programs.

The Committee brings together 41 members from 26 African countries, representing all five geographical regions. Its work is organized through eight subcommittees pursuing complementary projects in policy development, clinical guidance, research, professional education, patient information and networking.

1. Nouakchott Declaration Task Force: From commitment to implementation

A central achievement is the development and promotion of the "Nouakchott Declaration on Organ Donation and Transplantation in Africa". The Declaration was adopted in May 2025 during the First African Forum on Organ Donation and Transplantation (AFODT), held in Nouakchott, Mauritania, in collaboration with the Mauritanian National Council for Donation and Transplantation (CNDT), the Mauritanian Society of Nephrology (SOMANEPH) and the Nouakchott Regional Authorities. More than 300 experts from 12 countries attended.

Following a continent-wide expert consensus process, the Declaration was published in September 2026 in Nephrology Dialysis Transplantation (doi: 10.1093/ndt/gfag209). Its eight principles address governance, ethical donation, awareness, partnerships, capacity building, sustainable financing, treatment procurement, and programs evaluation, adapted to African realities.

The Committee was entrusted with supporting its implementation. It therefore established the Nouakchott Declaration Group, bringing together AFRAN, WHO, ISN, TTS, DICG, IFKF, ASOT and AfPNA. The group was launched online on 29 June 2026, with partner presidents and representatives, including Professors Abdou Niang, Marcello Tonelli, Nadey Hakim, Thomas Mueller, Dina Abdellatif, Gamal Saadi and Mohamed Salah Eldine Zaki.

Eight Technical Implementation Task Forces (TITFs) were subsequently created, each addressing one principle of the Declaration. Their work is being developed in three pilot countries: Mauritania, Libya and Niger. The Second AFODT, scheduled for 21–23 January 2027 in Libya in collaboration with AFRAN, will help review progress and accelerate implementation.

2. Guidelines Subcommittee: An African framework for sustainable programs

After more than 18 months of collaborative work, the Committee developed guidelines entitled "How to Create and Maintain Kidney Transplant Programs in Africa". Reviewed by ten internationally recognized experts, this practical document offers an African-led framework for establishing and maintaining safe, ethical, equitable and sustainable kidney transplant programs.

A public consultation opened on 16 September 2026 and runs until 15 December 2026. Stakeholders are invited to submit comments and recommendations (afran.org/afran-transplant-committee-guidelines-kidney-transplant-in-africa/). The final guidelines will be published after the consultation closes.

3. Survey Subcommittee: Understanding the African landscape

The Committee's first survey, "Kidney Transplantation in Africa: Workforce, Capabilities and Perceived Barriers", involved 317 AFRAN-affiliated nephrologists and was published in Nephrology Dialysis Transplantation in August 2026 (doi: 10.1093/ndt/gfag030).

The study provided an overview of transplantation practices, workforce capabilities and perceived challenges. Although 71.3% of respondents, representing 28 countries, reported access to a kidney transplant program, only 18 countries had at least one centre performing local transplantation, and deceased-donor transplantation was available in just six. Financial constraints, insufficient government support and policy development, and sociocultural factors were identified as barriers.

A second survey will soon be launched: "Attitudes to Deceased Donation in Kidney Transplantation amongst African Nephrologists – A Mixed Methods Study". It will explore professional knowledge, perceptions and attitudes towards deceased donation, as well as barriers and opportunities for its development. African nephrologists are encouraged to participate.

4. Directory Subcommittee: Connecting transplant teams

The Directory project targets the African countries that have performed, or previously performed, kidney transplantation locally. It aims to identify regulatory authorities, institutions, hospitals, nephrology and paediatric services, surgical teams, immunology and paediatric services, surgical teams, immunology and pathology laboratories, pharmacology facilities and patient-support organizations involved in transplantation.

The objective goes beyond compiling contact details. It will connect professionals, foster regional collaboration and resource sharing, and support countries developing or sustaining transplant programs. The project is nearing completion and is expected to result in scientific publication.

5. Webinars Subcommittee: Sharing knowledge and experience

Since its establishment, this subcommittee has organized 13 webinars combining scientific updates, regional perspectives and interactive clinical discussions. Topics have included acute rejection, infectious complications after kidney transplantation in Africa, and strategies to address organ shortages, such as ABO-incompatible transplantation, kidney paired donation, desensitization and donation after circulatory death.

Other sessions have explored transplantation across Africa's five regions, highlighting local experiences and challenges while bringing African professionals into contact with invited international experts.

More recently, the Committee introduced clinical case-based webinars, enabling African teams to present and discuss clinical cases. This format promotes peer learning and showcases African expertise. The webinars are available on AFRAN's YouTube channel, and a scientific publication evaluating this educational experience and its contribution to professional knowledge exchange is in preparation.

6**. Therapeutic Patient Education Subcommittee:** Empowering donors and recipients

An innovative achievement is a multilingual educational brochure for living kidney donors. Produced in English, French, Arabic, Portuguese and Amazigh, it explains donor eligibility, medical and ethical safeguards, the evaluation process, surgery and post-donation follow-up. It will be disseminated through AFRAN's website and social media.

A scientific publication describing the brochure's development, methodology and evaluation among African patients is underway. A second project is also being developed: an educational video and brochure for kidney transplant recipients. They aim to improve understanding, adherence, infection prevention and long-term follow-up.

7. Literature Monitoring Subcommittee: Documenting African research

This subcommittee has initiated two bibliometric projects to strengthen the evidence base on organ donation and transplantation in Africa. The first analyses publications from 2024, aiming to provide an overview of scientific output, research themes and contributions from African countries and institutions.

The second covers 2016–2025 and will examine the impact of the COVID-19 pandemic on scientific publications in organ donation and transplantation. It will assess publication volume, research themes, collaboration networks and other bibliometric indicators.

8. Transplant Learning Subcommittee: Building educational capacity

In collaboration with the AFRAN Education Committee, the Transplant Learning initiative delivered AFRAN's first online course dedicated to kidney transplantation. Held between October 2025 and March 2026, the program comprised 36 lectures and eight interactive question-and-answer sessions and attracted 291 learners. An assessment took place in April 2026, with an excellent pass rate.

This experience demonstrated the potential of structured digital education to overcome geographical barriers, widen access to specialized knowledge and strengthen the next generation of African transplant professionals.

Looking ahead: A stronger African transplantation community

Together, these projects reflect our ambition to transform individual initiatives into coordinated continental action. Through advocacy, research, education and partnerships, the Committee seeks to expand safe, ethical transplantation and reduce inequalities. Our commitment remains clear: building African solutions through African expertise, collaboration and solidarity.

AFRAN Transplant Committee: If We Believe, We Can Achieve.

AFRAN EDUCATIONAL ACTIVITIES

AFRAN Online Kidney Transplantation Course: A Collaborative Educational Journey

BY MOHAMED ABDEL GAWAD & KHADIDJA HABCHI

The AFRAN Online Kidney Transplantation Course was developed through collaboration between the AFRAN Transplantation Committee and the AFRAN Education and Training Committee. Beginning in October 2025 and extending over approximately six months, the course brought together an international faculty and a large group of learners for a structured programme dedicated to kidney transplantation.

The idea for the course emerged during the AFRAN Congress in Tunis in April 2025 and was subsequently proposed to and approved by the Education and Training Committee. From the outset, the aim was to make specialist transplantation education accessible to clinicians across Africa through an online format. The collaboration between the two committees combined transplantation expertise with the planning and coordination needed to deliver a sustained educational programme.

The course comprised 36 lectures and eight interactive question-and-answer (Q&A) sessions, providing approximately 53 hours of educational content. Its international faculty included 36 lecturers, of whom 24 were from Africa and 12 were from outside the continent. The international speakers represented seven countries: Switzerland, Belgium, Spain, the United States, Canada, France, and the United Kingdom. This diverse faculty brought together a wide range of clinical expertise, research perspectives, and practical experiences in kidney transplantation, enriching discussions and encouraging the exchange of knowledge across different healthcare settings.

Interest in the course was substantial. A total of 291 candidates were accepted and enrolled following a registration process that included review of their CVs and motivation letters. Participants received welcome information and access to the course's communication and learning platforms. Two Google Classrooms were established to accommodate the cohort and provide a consistent place for lecture slides, recordings, question files, and announcements. An official WhatsApp group served as the main channel for timely updates and practical support.

Each session was announced in advance through a dedicated brochure introducing its topic and speaker. The live webinars followed a format that included presentations, questions from participants, and discussion with speakers and panelists. The eight dedicated Q&A sessions provided additional opportunities for interactive learning, clarification of important concepts, and discussion of clinical scenarios. Technical rehearsals with presenters helped prepare the sessions, while recordings and materials shared afterwards allowed participants to return to the content at their own pace. Delivering a course of this scale over six months also required continuing support with registration, classroom access, video playback, and other technical questions.

Participant feedback was sought during the course. A questionnaire circulated after the seventh lecture received 64 responses and asked learners about the usefulness of the WhatsApp group, the organisation and content of Google Classroom, and the question-and-answer and clinical case sessions. The responses were strongly positive across these areas, providing useful feedback while the programme was still under way.

Learning was assessed through a final multiple-choice examination. When some candidates encountered connectivity or submission problems during the first examination, a resit was organised to give affected participants a fair opportunity to complete the assessment. In total, 171 candidates successfully completed the course and received certificates recognising their achievement.

Although designed around the educational needs of Africa, the course also reached learners beyond the continent. Sixteen successful candidates came from eight countries outside Africa: Kuwait, Pakistan, Qatar, the United Arab Emirates, the United Kingdom, Saudi Arabia, Lebanon, and Sri Lanka. Their participation extended the exchange of transplantation knowledge and professional experience beyond AFRAN's usual geographical boundaries.

The course concluded with messages of appreciation from participants for the faculty and organising team. Its longer-term educational impact is intended to be examined through a post-course evaluation assessing participants' experiences, perceived learning, clinical confidence, and intended changes in practice.

The AFRAN Online Kidney Transplantation Course demonstrates what sustained cooperation between the Transplantation Committee and the Education and Training Committee can achieve. Over approximately six months, the programme successfully brought together African and international experts, delivered an extensive educational curriculum, and created opportunities for professional exchange across geographical boundaries. We are grateful to the AFRAN leadership, course steering committee, speakers, moderators, organisers, and participants whose contributions made this programme possible.

Please connect on line to read AFRAN Transplantation committee papers.

Davies M. et al. Nephrol Dial Transplant. 2026 Aug 27;41(9):1654-1664 **Kidney transplantation in Africa**-workforce, capabilities and perceived barriers.
Haddiya I et al. Nephrol Dial Transplant. 2026 Sep 10:gfag209 Nouakchott Declaration: Promoting Organ **Donation** and Transplantation in Africa.

AFRICAN ASSOCIATION OF NEPHROLOGY NEWSLETTER
Number 3 / 2026

AFRAN NEWSLETTER

AFRAN OFFICE SECRETARIAT

Meet the AFRAN Office Secretariat: Supporting Our Members Across Africa



BY LETHISHA HARILALL.

OFFICE AFRAN SECRETARY

The African Association of Nephrology (AFRAN) is supported by Turners Secretariat, based at Turners House in Durban, South Africa. Turners provides administrative and organizational support to AFRAN, working closely with the President, General Secretary, Executive Council (ExCo) and other office bearers to ensure the smooth running of the Association and the delivery of its activities and initiatives.

The Secretariat team works behind the scenes to support AFRAN's membership administration, communications, meetings, congresses, educational activities, financial administration and general governance. Team members work collaboratively to coordinate projects, prepare correspondence and documentation, assist with budgets and financial matters, and facilitate communication between members and the Executive Council. This work helps AFRAN strengthen its network of nephrology professionals, promote education and collaboration, and advance kidney health across the African continent.

How can AFRAN members contact the Secretariat?

To streamline communication and ensure that enquiries reach the appropriate people, members are encouraged to use the central AFRAN email address: info@afran.org. This address serves as the main point of contact for the Secretariat. The Secretariat will acknowledge and coordinate enquiries, address administrative matters directly where possible, and refer requests requiring a decision or input from the Executive Council to the relevant office bearers.

Members may use this email address to enquire about AFRAN membership and renewals, membership fees and payment arrangements, letters of support, congress endorsements, sponsorship-related enquiries, and other requests or proposals. Requests should include the member's full name, country, institution, contact details and a clear description of the assistance required. Where applicable, members should also provide supporting documents, relevant deadlines and any congress or event information to help facilitate a timely response.

Membership and payments

Professionals interested in joining AFRAN can find membership information and application details on the official website at www.afran.org. The Secretariat can assist with the application process, membership status, fees and payment instructions. Members making payments should request or confirm the applicable amount and approved payment details with the Secretariat before proceeding, and provide proof of payment where required.

AFRAN values the participation and contributions of its members across Africa and the wider nephrology community. The Secretariat remains committed to providing reliable administrative support, facilitating communication and helping members engage with the AFRAN's activities and opportunities.

For membership enquiries, letters of support, congress endorsement requests or any other AFRAN-related assistance, please contact info@afran.org.

We look forward to continuing to support AFRAN and its members as we work together towards better kidney health across Africa.


Theola Ganasen
AFRAN Membership


Joanne Audie
AFRAN Web


Delia Watterson
AFRAN Finance


Gill Slaughter
Operations Director

AFRICAN NEPHROLOGISTS

African nephrologists reach the world.

BY TAIEB BEN ABDALLAH



Prof. Mohamed Aziz EL MATRI
AFRAN President 1995-1997
Founder member of AFRAN

It is a great honour to have been invited to pay tribute to Professor Mohamed Aziz El Matri in the section entitled **"African Nephrologists Making an Impact on Global Nephrology"** in the third issue of the AFRAN Quarterly Newsletter.

Professor El Matri was the first physician to receive a Doctor of Medicine degree from the Faculty of Medicine of Tunis and was among the pioneers who laid the foundations of nephrology in the Maghreb region.

Since embarking on his career in 1975, he has demonstrated an unwavering commitment to the development of nephrology in Tunisia, particularly in the fields of renal replacement therapy and kidney transplantation, as well as in medical education and scientific research.

He is a founding member of several medical societies dedicated to intensive care medicine, nephrology, dialysis and kidney transplantation, both in Tunisia and across Africa, the Arab world and the Middle East. Among his many achievements was his contribution to the founding of AFRAN in Cairo in February 1987.

Throughout his distinguished career, he has served as president of several medical societies, most notably AFRAN from 1995 to 1997. During his presidency, he organised the Fourth AFRAN Congress in Tunis in 1995, held jointly with the ASNRT Congress, alongside the First International Advanced Course in Nephrology. This landmark event brought together numerous young African nephrologists and provided an important opportunity for scientific exchange and professional development.

Drawing on his extensive international network and his active involvement in organising numerous AFRAN congresses and advanced nephrology courses across the continent—including those held in Tunis in 1995, Dakar in 1996 and Abidjan in 1997—Professor El Matri made an invaluable contribution to the advancement of nephrology in Africa, the Arab world and the Mediterranean region. His commitment to education and knowledge sharing also helped train and inspire several generations of nephrologists.

Throughout his hospital and academic career, Professor El Matri has been admired for his scientific rigour, clinical acumen and exemplary collegial spirit. His kindness towards colleagues and trainees, together with his profound humanism and compassion for the patients entrusted to his care, have further distinguished him as both a physician and a mentor. His remarkable achievements and lasting contributions have been recognised on numerous occasions by regional and international scientific societies.

On a more personal note, I am particularly proud to have been one of his students. I hold him in the highest esteem and remain deeply grateful for his guidance, his teaching and the lasting influence he has had on both my professional development and my personal journey

AFRAN COLLABORATIONS

ISPD 2026 Cape Town: A Historic Milestone for Peritoneal Dialysis in Africa

BY NICOLA WEARNE
On behalf of the Local Organizing committee

The 18th International Society for Peritoneal Dialysis (ISPD) Congress, held in Cape Town from 29 September to 3 October 2026, marked a historic milestone as the first ISPD Congress hosted in Africa. Supported and endorsed by the African Association of Nephrology (AFRAN), it welcomed more than 600 delegates and reflected the growing enthusiasm for expanding peritoneal dialysis (PD) services across the continent.

African faculty contributed to sessions spanning all aspects of PD, acute kidney injury, paediatric nephrology, transplantation and kidney health policy. A dedicated French-language stream supported participation from francophone Africa, while the integration of the South African Nephrology Society Congress strengthened regional collaboration.

A major highlight was the African Nephrology Policy Forum, which brought together AFRAN leadership, international experts and policymakers to discuss how to improve kidney care across Africa. Presentations addressed workforce shortages, prevention, access to dialysis and transplantation, paediatric kidney care, and the ethical challenges of allocating limited resources. The discussions underscored the need for collaboration, sustainable financing, training and meaningful government engagement.

The Congress theme, "Integration: PD for Everyone, by Everyone, Everywhere," resonated strongly with the opportunities and challenges facing Africa. PD can help extend kidney replacement therapy to underserved communities, but successful programmes rely on integrated multidisciplinary teams. Nephrologists, nurses, surgeons, allied health professionals, patients and families each have an essential role. Training, reliable supply chains and access to catheter insertion are also vital.

The Congress was made possible through the commitment of many colleagues on the Local Organising Committee (LOC). Brett Cullis, a member of the LOC, played a central role in bringing this landmark meeting to South Africa. His new presidency of ISPD offers an important opportunity to advance the message that PD should be part of mainstream kidney care, with patients at the centre and genuine access for those who prefer or may benefit from it.

On behalf of the LOC, I congratulate Brett warmly on becoming the 19th President of ISPD. We look forward to working with him and the wider nephrology community to build on Cape Town's momentum and strengthen access to high-quality PD across Africa.

Our vision is clear: a strong, united African nephrology community that shapes its own agenda while benefiting from global solidarity. By working hand in hand with AFRAN and national societies, the ISN Africa Regional Board remains committed to ensuring that Africa's challenges, innovations, and successes are visible, valued, and acted upon at the highest levels.

Together, we can transform kidney care across the continent and ensure that no African patient is left unheard.



AFRAN ACTIVITIES REPORTS

AFRAN Webinars in 2026: Connecting Expertise Across Africa

BY MOHAMED ABDEL GAWAD, AFRAN EDUCATION COMMITTEE MEMBER. AFRAN NEWSLETTER ASSOCIATE EDITOR

From January to August 2026, AFRAN's committees and working groups presented a diverse programme of webinars addressing clinical practice, prevention, transplantation, professional ethics, and emerging technologies. The sessions brought together speakers and moderators from across Africa and beyond, offering opportunities to discuss shared challenges while recognising the different resources and circumstances in which kidney care is delivered.

The **AFRAN Transplant Committee** began the year on 16 January with *Kidney Transplantation in Central Africa: Current Situation and Challenges*. Speakers from Cameroon, Uganda, Rwanda, and Zambia contributed perspectives from their respective countries. By focusing specifically on Central Africa, the webinar drew attention to the importance of understanding transplant practice within its regional context and of sharing experience across national boundaries.

Transplantation remained a prominent theme throughout the programme. On 4 May, **Women in Nephrology Africa (WIN-A)** hosted a webinar on *Clinical Realities, Prioritisation, and Ethics in Pediatric Kidney Transplantation*. The session combined a pediatric clinical case presented by Khadidja Abugrain, a discussion of a pediatric dialysis scoring system by Adewale Adetunji, and an examination of ethical principles in priority setting by Valerie Luyckx. Together, these topics highlighted the difficult decisions that can arise when clinical needs must be considered alongside limited resources.

On 26 June, the Transplant Committee held its **11th webinar**, devoted to clinical cases. Three cases were presented and discussed, placing clinical reasoning and the exchange of practical experience at the centre of the session. The committee's **12th webinar**, held on 21 August in collaboration with the Donation and Transplantation Institute, returned to the wider challenge of organ availability. Under the title *Overcoming the Organ Shortage Challenge (2)*, Julieta Santillan discussed donation after circulatory death as a complementary approach to expanding donation, while Pedro Ventura Aguiar addressed current challenges and emerging strategies in transplantation for highly sensitized recipients. The two presentations considered different points along the transplant pathway: increasing the donor pool and improving access for patients who are particularly difficult to match.

Beyond transplantation, the programme addressed major causes and consequences of kidney disease. On 22 January, the **AFRAN AKI and Critical Care Nephrology Working Group** hosted *Sepsis Associated AKI: Global and Regional Look*. Ahmed Fayed discussed the pathogenesis and epidemiological status of sepsis associated acute kidney injury, while Sudakhina Ghosh examined specific causes and the situation in Africa and low resource settings. The webinar connected a major critical care problem with the realities of its recognition and management in different health systems.

Prevention was another recurring priority. On 10 February, the **AFRAN Prevention and Advocacy Committee** presented *Chronic Kidney Disease: Prevention Strategies in Africa*, with Professor Habib Skhiri as speaker. The session placed prevention within the African context, where approaches must account for local populations and healthcare settings. The committee continued this theme on 17 July with *Hypertension and the Kidneys: A Vicious Cycle and How to Break It*. Presented by Dr Brian Rayner, the webinar focused on the close relationship between high blood pressure and kidney disease and the importance of addressing it in clinical practice.

AFRAN's webinars also considered how nephrologists communicate, learn, and use new tools. On 3 February, the **Web and Media Committee** hosted *Ethics of Social Media in Nephrology: Challenges and Potential*. Valerie Luyckx, Manjusha Yadla, and Mohammed Abdel Gawad brought different perspectives to a discussion of the opportunities social media creates for professional exchange and education, alongside the responsibilities that come with using these platforms.

On 10 June, the **Young Nephrologists Committee** hosted a French language webinar on *Artificial Intelligence in Nephrology Practice and Digital Health in Africa*. Presentations by Hadiya Intissar and Diawara Amadou considered artificial intelligence in nephrology and the opportunities and constraints of digital health across the continent. Offering the session in French helped bring these rapidly developing subjects to a wider part of AFRAN's multilingual community.

Taken together, these webinars show the breadth of AFRAN's educational activity during the first eight months of 2026. They connected regional experience with international expertise, moved between broad health system questions and individual clinical decisions, and gave multiple AFRAN committees a platform to contribute to the conversation. Above all, the programme kept the needs and realities of kidney care in Africa at its centre.

AFRICAN KIDNEY RESEARCH WATCH

African Nephrology in Print: January–July 2026

BY YANNICK NLANDU, AFRAN YOUNG NEPHROLOGY COMMITTEE CHAIR, AFRAN NEWSLETTER ASSOCIATE EDITOR

This issue's research watch gathers four papers published by African nephrologists between January and July 2026, and reads them not as isolated reports but as a single, connected account from the sheer scale of kidney disease on the continent, through the systems meant to treat it, to a local success story and, finally, to the science that underpins how we diagnose the disease in the first place.

The story begins with the size of the problem. In the *American Journal of Kidney Diseases* (online 28 April 2026), George, Okpechi and the CKD-Africa Collaboration pooled individual data from 67 studies and 91,723 adults across 19 countries, and arrived at the most reliable figure yet: an overall chronic kidney disease prevalence of 13.7% — roughly one African adult in seven. That single number reframes CKD as a continental public-health priority and makes the case for early detection and screening impossible to ignore.

If so many people are affected, the next question is whether the systems to treat them exist. Here the Transplantation Committee of AFRAN answered directly: writing in *Nephrology Dialysis Transplantation* (online February 2026), Davies, Chiba and colleagues surveyed 317 nephrologists from across Africa. Two-thirds were active in transplantation and most had been trained, yet deceased-donor programmes existed in only six countries and government funding in just twelve, with activity concentrated in North Africa, Nigeria and South Africa. Cost, weak policy support and sociocultural barriers emerged as the main obstacles — in effect, a ready-made advocacy agenda for the association.

Against that backdrop of scarcity, the third paper offers proof that progress is possible. In *Renal Failure* (online June 2026), Djientcheu, Ashuntantang and their team at Yaoundé General Hospital reported the first 17 kidney transplants ever performed in Cameroon and the Central African sub-region. All donors were relatives; despite two surgical complications, every recipient is alive with stable kidney function and a good quality of life. It is a concrete demonstration that a locally led team, supported by international collaboration, can bring transplantation to a setting that had none.

Finally, the series turns to the science beneath the diagnosis. In *Kidney International* (online July 2026), Gray, Fabian, Naicker, Fatumo and colleagues showed that African-enriched regulatory variants in the *GATM* gene influence serum creatinine, and therefore the creatinine-based estimates of GFR used every day in clinics. Because these variants can shift eGFR independently of true kidney function, they risk misclassifying CKD in people of African ancestry - a reminder that even our most basic measurements need to be validated in African populations.

Taken together, these four studies trace a coherent arc - burden, capacity, achievement and measurement - and share one conclusion: Africa's kidney health depends on African-generated evidence, African-led services and sustained investment in both.

References

1. George C, Okpechi IG, et al.; CKD-Africa Collaboration. Am J Kidney Dis. 2026;88(1):44–66
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BEST WKD 2026 African photo

20 YEARS
World Kidney Day
12 MARCH 2026

Our winner of the BEST WKD 2026 photo: Dr Huda Al Akrabi from Tanzania (YNC initiative)

AFRICAN ASSOCIATION OF NEPHROLOGY NEWSLETTER
Number 3 / 2026

AFRAN NEWSLETTER

NEPHROLOGY HIGHLIGHT IN AFRICA

SENEGAL: Contributing to nephrology development in West Africa

BY NIAKHALEEN KEITA, AFRAN NEWSLETTER ASSOCIATE EDITOR

& MOUSTAPHA FAYE, GENERAL SECRETARY OF SOSENDT

Senegal is a West African country bordered by the Atlantic Ocean to the west and sharing borders with Mauritania, Mali, Guinea, Guinea-Bissau and The Gambia. With a population of approximately 19 million in 2025, Senegal has a predominantly young population, with a mean age of about 24 years. The population is unevenly distributed across the country: Dakar, although the smallest administrative region, is home to more than one-fifth of the national population, whereas the southeastern regions account for almost one-third of the country's territory but only a small proportion of its inhabitants. Senegal is classified as a lower-middle-income country and has experienced relative political stability, providing a favourable environment for the progressive development of specialized healthcare.

Kidney disease represents an important and evolving public health challenge. The 2024 national STEPS survey, which included chronic kidney disease (CKD) among its new health modules, estimated the national prevalence of CKD at 4.3%. Hypertension, diabetes and other non-communicable diseases are increasingly important contributors to kidney disease, alongside infectious and other context-specific causes.

In Senegal, kidney disease is diagnosed according to recommended clinical and laboratory standards, including blood and urine testing for kidney function and markers of kidney damage. Renal biopsy and histopathological analysis are also available locally, supported by dedicated nephropathology expertise. Regular clinicopathological meetings between nephrologists and pathologists facilitate the correlation of clinical, laboratory and histological findings and contribute to diagnostic accuracy and patient management. Genetic testing is available locally and is increasingly integrated into the diagnostic evaluation of selected kidney diseases. In addition, collaborations with international centres and specialised laboratories provide access to complementary genetic and diagnostic investigations when required, strengthening the capacity of Senegalese teams to investigate complex and rare kidney diseases.

Kidney replacement therapy has been available in Senegal for several decades. Haemodialysis was introduced in 1987, and dialysis capacity has progressively expanded. Today, public haemodialysis services are available across all regions of the country, although access remains influenced by geographical distribution, infrastructure and the availability of trained healthcare professionals. An important milestone in Senegal's kidney care policy was achieved in 2012, when dialysis became free of charge in the public sector for Senegalese patients with end-stage kidney disease, following nephrologist prescription and registration on a public dialysis waiting list. This policy substantially reduced the direct cost of dialysis sessions and dialysis consumables, although patients may still have to pay for several associated treatments and medications. Health insurance coverage has progressively expanded through the national Universal Health Coverage (CMU) programme, which covered approximately 53.6% of the Senegalese population between 2019 and 2022. Senegal has also developed one of the longest-standing peritoneal dialysis (PD) programmes in West Africa. PD was initiated in March 2004 at CHU Aristide Le Dantec in Dakar, with both continuous ambulatory and automated PD available. Over the past two decades, the programme has progressively expanded from its initial center in Dakar to regional centers, supporting the decentralization of PD care across the country. Today, PD is provided through six centers, including a paediatric nephrology unit. More recently, nephrologist-led percutaneous PD catheter placement has further strengthened local capacity.

A major new chapter in Senegalese nephrology began in November 2023, when the first three kidney transplantations were successfully performed in Dakar using living donors, through collaboration between CHU Aristide Le Dantec and Hôpital Militaire de Ouakam, with international support. However, Senegal has a longer-standing experience in the care of patients undergoing kidney transplantation, with pre-transplant evaluation and preparation, as well as post-transplant follow-up, being provided locally for many years, including for patients who underwent transplantation abroad. The establishment of a local transplantation programme therefore built on existing clinical expertise and follow-up capacity. It marked an important transition from a predominantly dialysis-centred model toward a broader kidney replacement therapy programme. Further priorities include ensuring equitable access to transplantation, strengthening long-term post-transplant care, and developing robust national transplant data systems.

Training has been central to the development of nephrology in Senegal. The four-year nephrology Diploma of Specialized Studies (DES) at Université Cheikh Anta Diop (UCAD) in Dakar was established in 2004–2005 and has become an important training programme for the region. Over 21 academic years, 17 cohorts have been trained, with more than 200 physicians graduating from the programme. Trainees have come from 22 countries in Africa and the Middle East, highlighting the programme's regional reach. By 2025, Senegal had 53 trained nephrologists, including six professors, with around 20 additional physicians in training, as well as four paediatric nephrologists. The development of kidney replacement therapy training has also extended to nurses, with master's-level programmes available in three universities.

This investment in human resources has helped transform Senegal into a regional training hub. Senegalese nephrologists contribute to education, research and professional activities through the African Association of Nephrology (AFRAN), International Society of Nephrology (ISN), International Society for Peritoneal Dialysis (ISPD), International Pediatric Nephrology Association (IPNA) and the Société Francophone de Néphrologie, Dialyse et Transplantation (SFNDT).

Senegal has a long history of engagement with the African nephrology community. Dakar hosted the 11th AFRAN Congress in 2011 and has regularly hosted regional and international educational activities in nephrology and dialysis. Senegal is currently represented at the highest level of AFRAN, with Professor Abdou Niang current AFRAN President. Professor Boucar Diouf, the first Senegalese nephrologist and a pioneer of nephrology in the country, received the 2025 African Nephrology Pioneer Award from the ISN.

Société Sénégalaise de Néphrologie, Dialyse et Transplantation (SOSENDT)

The Société Sénégalaise de Néphrologie (SOSENEPH) became the Société Sénégalaise de Néphrologie, Dialyse et Transplantation (SOSENDT) during its extraordinary general assembly held in Saly (Mbour) on 2021; November 21st

Number of Members:	63
Website:	www.sosendt.org
Chair:	El Hadji Fary Ka
Deputy Chair:	Yaya Kane
Secretary General:	Moustapha Faye
Deputy Secretary General:	Damang Dia
Treasurer:	Sidy Ba
Deputy Treasurer:	Khodia Fall
Contact :	+221 77 669 14 07 sosendt@gmail.com

SENEGALESE NEPHROLOGY DATA

NUMBER NEPHROLOGISTS	60 3.15 per million inhabitants
TEACHING NEPHROLOGY Dpt	1 (UCAD)
NEPHROLOGY Dpt (Nbr)	28
HD CENTRES (Nbr)	28 public, 8 Private HD centers HD psts: 488 (80.5% in public)
PD CENTRES (Nbr)	6
TRANSPLANT CENTRES (Nbr)	1
PEDIATRIC NEPHROLOGY Dpt	1
NATIONAL REGISTRY (Y or N)	No
FACULTY MEDICINE (Number)	5
Patient Association (Yes/No)	Yes
CKD 4 and 5 (pmp)	NA
HD patients (Nbr)	1392 (74.1% in public settings)
PD patients (Nbr)	53
TRrecipients (Nbr)	7
HD session reimbursement (US$)	Free of charge in public settings
PD Reimbursement (base of CAPD 4 exchanges/day for 2 days) (US$)	Free of charge in public settings
Access to dialysis/CKD 5 (%)	16.25 (in public settings)
Population with insurance coverage in the country (%)	53.6

LAST CONFERENCE REPORT

The annual meeting of the Société Sénégalaise de Néphrologie, Dialyse et Transplantation (SOSENDT) brings together nephrologists and other healthcare professionals to discuss key issues in kidney health. Beyond scientific exchange, these meetings play an important role in strengthening professional networks, supporting continuing medical education, fostering research collaboration, and advancing kidney health advocacy in Senegal





2026 World kidney day celebration

NEPHROLOGY HIGHLIGHT IN AFRICA

TANZANIA: Contributing to nephrology development in East Africa

BY JACQUELINE SHOO, AFRAN NEWSLETTER ASSOCIATE EDITOR

& JONATHAN MNGUMI AND PASCHAL RUGGAJO

The United Republic of Tanzania, the largest country in East Africa, has a population exceeding 67 million people. Over the past two decades, Tanzania has made remarkable progress in nephrology through increasing recognition of kidney disease, investment in specialist training, expansion of kidney replacement therapy, establishment of kidney transplantation, and sustained national and international collaboration. In Tanzania, the nephrology workforce has expanded, alongside a growing number of dialysis units in response to the increasing demand for kidney care. Tanzania has progressively developed a comprehensive kidney-care system encompassing adult and paediatric nephrology, nephropathology, haemodialysis, peritoneal dialysis (mostly for acute kidney injury in children), transplantation, interventional radiology, research, and professional education.

The Growing Burden of Kidney Disease
Kidney disease is an increasingly important public health challenge in Tanzania. Studies have demonstrated a substantial burden of chronic kidney disease (CKD), with prevalence estimates of approximately 7% in some populations and higher rates reported in selected urban communities. Hypertension, diabetes mellitus, obesity, HIV infection, glomerular diseases, and other communicable and non-communicable diseases contribute significantly to the burden of kidney disease. This growing burden has increased the need for earlier detection, prevention, risk-factor modification, and multidisciplinary kidney care.

Clinical Nephrology and Diagnostic Services
Specialist nephrology services are available in major tertiary and referral hospitals across Tanzania. Diagnostic evaluation includes laboratory investigations, urine testing, imaging, and kidney biopsy. A notable achievement has been the development of nephropathology services at Muhimbili National Hospital (MNH), supported by three trained nephropathologists. Interventional radiology services support image-guided kidney biopsies, tunneled haemodialysis catheter placement, vascular-access interventions, treatment of central venous stenosis, percutaneous nephrostomy, and selected post-transplant-related procedures/complications.

Haemodialysis and Peritoneal Dialysis
Haemodialysis remains the most widely available form of kidney replacement therapy in Tanzania and has expanded considerably across public and private facilities. Peritoneal dialysis has played an important role in the management of acute kidney injury, particularly among children. Experience from Kilimanjaro Christian Medical Centre (KCMC) demonstrated that PD can provide effective and affordable lifesaving therapy in resource-constrained settings.

Adult and Paediatric Nephrology
Adult nephrologists manage CKD, hypertension, diabetic kidney disease, glomerular diseases, acute kidney injury and kidney failure. Paediatric nephrology services continue to develop despite workforce constraints. Tanzania currently has a few trained paediatric nephrologists, and care for children with kidney disease is often supported by adult nephrologists. Services are provided for congenital and acquired kidney diseases, dialysis, and transplantation.

Kidney Transplantation: From Vision to a National Programme
Following the first kidney transplant at MNH in 2017, Tanzania now has active transplant programmes at Muhimbili National Hospital, Benjamin Mkapa Hospital (BMH) and Bugando Medical Centre (BMC). These centers provide living-related transplantation for adults and children utilizing both open and laparoscopic living-donor nephrectomy. Published outcomes from Muhimbili and Benjamin Mkapa hospitals have demonstrated encouraging patient and graft survival outcomes.

Training, Partnerships and Professional Leadership
From a small nephrology task force two decades ago, Tanzania now has approximately 40 adult nephrologists. Muhimbili University of Health and Allied Sciences (MUHAS) offers a two-year nephrology super-specialization programme, nephrology nursing training, and a six-week hemodialysis course for doctors and nurses. The development of nephrology has been accelerated by North-South collaborations such as Tokushukai Medical Group (JTMG) of Japan and BMH and South-South collaborations of BLK Hospital New Delhi India with MNH and Saving Young Lives, a global initiative NGO with KCMC

The Nephrology Society of Tanzania (NESOT), established in 2012, advances nephrology through scientific meetings, quarterly Grand Rounds, continuing medical education, advocacy, and collaboration with the Ministry of Health. NESOT also commemorates World Kidney Day, World Transplant Day, and World Kidney Donor Day and launched its first NESOT Women's Day initiative in 2026.

Looking Ahead
In 2027, Dar es Salaam will host the 19th AFRAN Congress jointly with the 11th NESOT Scientific Congress and the African Paediatric Nephrology Association Congress. Tanzania continues to prioritize CKD prevention, equitable access to kidney replacement therapy, transplant expansion, advanced diagnostics, research, and workforce development. The country's experience demonstrates the importance of local leadership, sustained investment, multidisciplinary collaboration, and meaningful international partnerships.

NEPHROLOGY SOCIETY OF TANZANIA (NESOT)

Number of Members:	40
Website:	https://nesot.or.tz/
Chair:	Paschal Ruggajo
Deputy Chair:	Sudakishna Gosh
Secretary General:	Jonathan Mngumi
D. Secretary General:	Daniel Msilanga
Treasurer:	Jacqueline G Shoo
Deputy Treasurer:	Priyank Punatar
Contact :	info@nesot.or.tz +255 759 915233
AFRAN representative	Jacqueline G. Shoo

TANZANIAN NEPHROLOGY DATA

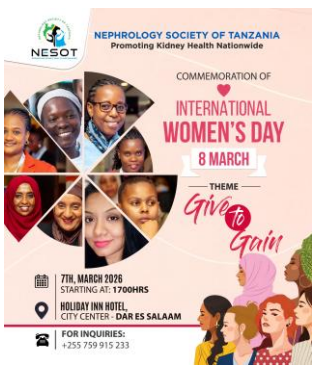
NUMBER NEPHROLOGISTS	40 (August 2026) 0.64 per million inhabitants
TEACHING NEPHROLOGY Dpt	1 Muhimbili University of Health and Allied Sciences
NEPHROLOGY Dpt (Nbr)	Mainly in the national hospitals
HD CENTRES (Nbr)	74
PD CENTRES (Nbr)	0 established chronic PD centers Acute PD available in selected hospitals for paediatric AKI
TRANSPLANT CENTRES (Nbr)	3 – Muhimbili National Hospital (MNH), Benjamin Mkapa Hospital (BMH), and Bugando Medical Centre
PEDIATRIC NEPHROLOGY Dpt	1 at Muhimbili National Hospital
NATIONAL REGISTRY (Y or N)	No
FACULTY MEDICINE (Number)	10 medical schouls 1 teaching nephrology
Patient Association (Yes/No)	Yes
CKD prevalence estimation	7%
HD patients (Nbr)	2750 (ESKD estimation 5800 to 8500 patients)
PD patients (Nbr)	0 chronic (only for Paed-AKI)
TR recipients (Nbr)	(mainly living-related donation)
HD session reimbursement (US$)	Covered through the national health insurance system
PD Reimbursement (based on CAPD 4 exchanges/day for 2 days) (US$)	Incorporated in the NHIF
Access to dialysis/CKD 5 (%)	32% (Upper bound estimated need)
Population with insurance coverage in the country (%)	21% (year 2021)

LAST CONFERENCE REPORT

The nephrology Society of Tanzania (NESOT) held its 10th Scientific Conference and AG M in Dar es Salaam on 14-15 August 2025, celebrating a decade of advancing kidney health. Discussions highlighted progress in transplantation, dialysis paediatric kidney care, prevention, research and workforce development. Local and international experts shared insights, whule government reaffirmed commitment to kidney services, training ans collaboration across Tanzania







AFRAN ACHIEVEMENT

The African Journal of Nephrology: a new home, and a growing archive

BY RAZEEN DAVIDS,
AFRICAN JOURNAL OF NEPHROLOGY DEPUTY EDITOR

The African Journal of Nephrology (AJN), the official journal of AFRAN, has migrated to a new independent platform and taken several steps to secure its future and complete its publication record. Here is what has changed, what we did behind the scenes to make sure nothing was lost, and how members can help.

An independent home for the journal

AJN now publishes at its own address, **afranjournal.org**, on the Open Journal Systems (OJS) platform hosted by PKP Publishing Services. The journal is managed directly by AFRAN rather than through a host institution (formerly, this was Stellenbosch University). AJN remains fully open access, with every article published under a Creative Commons Attribution (CC BY 4.0) licence and free to read, download and share.

The journal continues to publish continuously through the year, so accepted papers appear online without waiting for a complete issue to be assembled.

Making sure nothing was lost

Moving a journal is not simply a matter of copying files to a new server. Its permanent links, metadata and its records in the systems that index and preserve scholarly literature need to be preserved and updated. The bulk of the migration effort went into getting these details right.

-Permanent links preserved. Every AJN article carries a Digital Object Identifier (DOI), the permanent link that citations and reference lists rely on. AJN's DOI prefix (10.21804) has been transferred from the Stellenbosch University account to AFRAN's own account with Crossref, so the journal now registers and controls its DOIs directly. Each existing DOI was re-deposited to point at the article's new location on **afranjournal.org**.

-Records updated across the scholarly services. We have updated AJN's entry in the Directory of Open Access Journals (DOAJ) and OpenAlex to the new address, and the journal's ISSN record now names AFRAN as publisher, with the change of web address still being processed by the ISSN centre (AJN's ISSNs, 2306-8205 print and 2518-4601 electronic, are unchanged). Discovery databases locate journal content through Crossref and through the journal's automated metadata feed, both now active on the new platform.

--Citations corrected. In reviewing the indexed record, we found that references to the South African Renal Registry's 2012–2014 annual reports (which were never published in AJN) had been mis-attributed to the Registry's later reports that AJN does carry. We have registered permanent identifiers for the earlier reports so that these citations resolve to the correct source, and OpenAlex is updating its records accordingly.

Preserved for the long term. Our full archive is now registered with the PKP Preservation Network and is confirmed as preserved. This is a system that safeguards our content and keeps it available even if the journal's own systems were ever to fail, a standard expected of any good online journal.

Recovering the journal's history

Alongside current publishing, we have continued the process of restoring the journal's older content. The most recent success is **Volume 7 (2003)**, from the early years when the journal was published from Egypt. With the help of Mohammed Gawad, the printed issue was located, scanned and added to our archive. Every one of these articles carries both its English abstract and a French résumé transcribed from the printed issue, a fitting reflection of the journal's pan-African, English- and French-language readership.

Looking ahead: preparing for Scopus

Our next major goal is to have AJN evaluated for indexing in **Scopus**, one of the large international citation and abstract databases. Acceptance would widen the reach and visibility of work published in AJN and is a meaningful marker of quality for authors deciding where to submit.Titles are assessed by Scopus against a set of published criteria, and much of the groundwork is already under way. It includes making the journal's peer-review process and its publication-ethics and malpractice policies clearly visible on the site and aligned with the standards of the Committee on Publication Ethics (COPE), presenting a clear aims and scope and full editorial-board affiliations, and ensuring English abstracts and Roman-script reference lists throughout. The move to permanent DOIs, long-term preservation and a complete, consistent publication record, described above, all count toward what Scopus assesses.

We will keep members informed as the submission takes shape.

Recognized for South African author subsidy

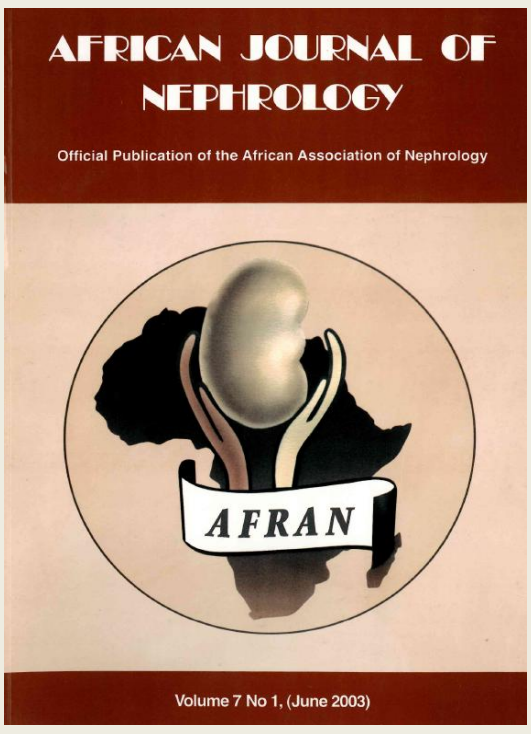
South African authors have an added incentive to publish in AJN. Their Department of Higher Education and Training (DHET) has updated the journal's status on the ZA Publication Monitor to **"eligible for subsidy"**. Peer-reviewed articles published in AJN by authors based at South African institutions therefore generate the DHET research publication subsidy for their universities, recognition that places AJN among the journals approved for this purpose.

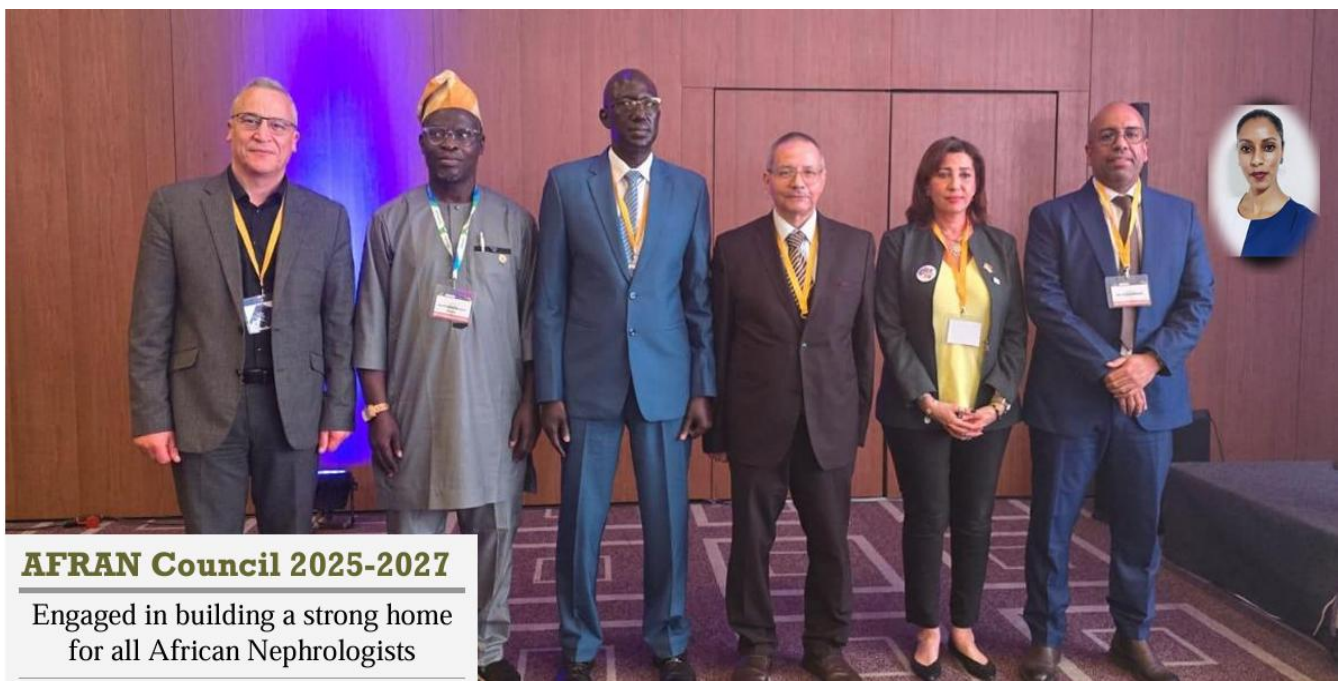
How members can help

We are still missing many issues published between **1997 and 2008**, from the journal's early print era. If you hold printed copies from those years, or know a library or colleague who might, please get in touch. We are glad to receive scans, or to borrow originals, scan them and return them. Every issue recovered brings the complete record closer.

We also warmly invite members to submit their work. AJN considers original research, reviews, case reports, guidelines and more, in English or French, on all areas of nephrology and hypertension across the continent.

To offer materials, submit a manuscript or ask about the journal, contact the Deputy Editor, Razeen Davids, at mrd@sun.ac.za, or visit afranjournal.org







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