

57th Annual Meeting Swiss Society of Nephrology SGN-SSN

Congress Kursaal Interlaken | December 4–5, 2025



Program

Registration



www.swissnephrology.ch

Congress venue

Congress Kursaal Interlaken
Strandbadstrasse 44, 3800 Interlaken

www.congress-interlaken.ch

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| Invitation 2025

Dear colleagues,

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

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

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

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

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

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

Yours sincerely,
The Congress Presidents

| Organization

Congress Presidents

Sibylle Tschumi, Berne
Wesley Hayes, Zurich
Ursula Dietrich, Berne (Pflege)
Claudia Oeschger, Berne (Pflege)

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■ | General information

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

Certificate of participation	The certificate of participation will be sent by e-mail (PDF) to all participants after the congress.
Cancellation	Written notification is required for all cancellations and changes. In case of cancellation 30 days prior the event, the refund of the amount paid will be done net of CHF 60.– for administrative costs. Thereafter no refund is possible. Legal jurisdiction is Berne.
Format of the event	The event is held in person, with no possibility to follow online via a live streaming. The congress language is English. «Pflegesymposien» in the respective national language. No simultaneous translation.
Industrial exhibition	An industrial exhibition will take place at the Congress venue. It will be open throughout the congress. Coffee (breaks) will be offered by exhibitors.
Oral Presentations	All oral and poster presentations must be given in English. Authors presenting an accepted paper must register and pay the appropriate registration fee. The Scientific Committee will select a number of abstracts which will be presented as oral presentations as such:
Long Oral Presentation (Thursday, December 4, 2025)	The time slot for classical oral presentation is 10 minutes (8-minute presentation and 2-minute discussion).
Short Oral Presentatio (Thursday, December 4, 2025)	The short oral presentation is designated to stimulate the discussion on posters. Each speaker will present the essence of his work in 3-minute presentation, followed by 2-minute discussion. The abstracts selected for this session will be also presented as classical printed-out posters. The poster format is DIN A0 (120x85 cm) (heightxwidth). The best posters will be awarded with a dedicated prize. The prizes will be awarded at the aperitif before the Networking-Dinner on Thursday, December 4, 2025 from approx. 19.00 hrs. The presence of the winners is desired.

Elevator pitch format
(Friday, December 5, 2025)

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

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

Selected abstracts for the YSN Best Oral Presentation will be presented in the innovative Pecha-Kucha storytelling format. The presentation consists of 20 slides (exactly 20) and each slide must be shown for 20 seconds. The best presentations will be awarded with a dedicated prize. **The prizes will be awarded at the aperitif before the Networking-Dinner on Thursday, December 4, 2025 from approx. 19.00 hrs. The presence of the winners is desired.**

Postwerwalk
SGN Awards

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

Credits

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

ERA National Society
of Nephrology Grant

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

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

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



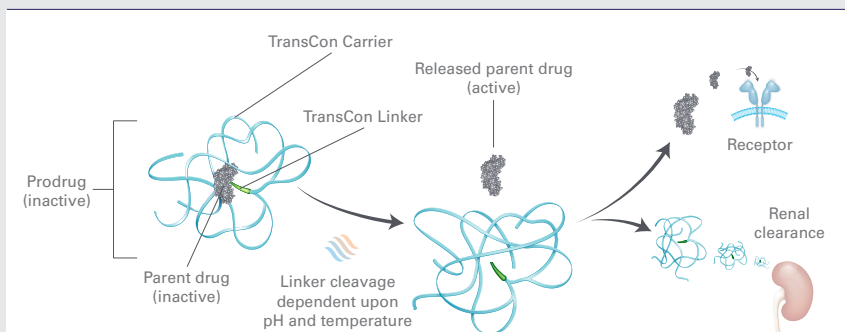
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TransCon prodrugs have 3 components: a parent drug, carrier, and linker that temporarily binds the two.

TransCon Technology

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When bound in the prodrug form, the TransCon Carrier inactivates the parent drug and shields it from receptor uptake, renal clearance and enzymatic degradation.

Following injection, autocleavage of the linker occurs under physiologic conditions, allowing sustained release of the active, unmodified parent drug at a predictable rate.

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

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

Ascendis Pharma Switzerland GmbH

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■ | Program at a glance

Thursday, December 4, 2025

	Theatersaal Room 1	Ballsaal Room 2
from 07.30	Registration and door opening Networking Area	
08.30–08.45	Welcome address	
08.45–09.30	State of the Art: The UK Kidney Ecosystem - Enabling Clinical Research for adults and children Dr. Louise Oni	
09.30–10.10	Short oral 1	Short oral 2
10.10–10.20	Short break	
10.20–11.00	Short oral 3	Short oral 4
11.00–11.30	Coffee break	
11.30–12.15	Parallel Symposium: Boehringer Ingelheim The CKD patient journey: innovations from the UK Prof. Smeeta Sinha	Parallel Symposium: CSL Vifor IgAN and the 2025 KDIGO Guidelines: DEARA's Clinical Journey Has Begun Dr. Min Jeong Kim One Year Later: Learnings from the First DEARA Experience Dr. Domenico Cozzo
12.15–13.00	State of the Art: Pregnancy in End-Stage renal disease Prof. Dr. Christopher T. Chan	Parallel Symposium: GlaxoSmithKline AG Viral Encounters in Kidney Care: Understanding the Burden of Disease and Role of Vaccination Prof. Dr. med. Uyen Huynh-Do Prof. Dr. med. Ulrich Heinerger
13.00–13.45	Lunch break	
13.45–14.30	State of the Art: Advances in therapy for Nephrotic syndrome Prof. Dr. Moin Saleem	Parallel Symposium: Ascendis Pharma Replacing What's Missing: Decoding Renal Clues in Hypoparathyroidism
14.30–15.15	Parallel Symposium: Sanofi Nephrological perspectives on thrombotic microangiopathies: When every minute determines organ function Prof. Dr. Andreas Holbro Prof. Dr. Fadi Fakhouri	Parallel Symposium: AstraZeneca TREAT-CKD - New horizons in improving patient outcomes in complex challenges with CKD
15.15–15.45	Coffee break	
15.45–17.40	Long Oral	
17.40–18.10	Young Swiss Nephrology Award	
18.20–22.00	Apéro and Networking-Dinner	

■ | Program at a glance

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

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

■ | Program at a glance

Friday, December 5, 2025

	Theatersaal Room 1	Ballsaal Room 2
from 07.30	Door opening Networking Area	
08.30–09.45	General Assembly SGN/SSN	
09.45–10.00	SGN Publication Award 2025	
10.00–10.15	Short break	
10.15–11.00	Parallel Symposium: Otsuka Future Perspectives of IgAN Management Prof. Dr. med. Uyen Huynh-Do PD Dr. med. Michael Rudnicki	Parallel Symposium: Roche Unlocking Better Outcomes: Advances in Immunotherapy for Lupus Nephritis Prof. Dr. Andrea Rubbert-Roth PD Dr. med. Harald Seeger
11.00–11.30	Coffee break	
11.30–12.15	State of the Art	Parallel Symposium: Novartis A new Era for managing IgAN + C3G Prof. Dr. med. Uyen Huynh-Do Prof. Patricia Hirt-Minkowski
12.15–13.00	Parallel Symposium: Alnylam Experiences with rare diseases in nephrology - how do you recognise and treat these patients?	Parallel Symposium: Swedish Orphan Biovitrum AG The Future of C3G and IC-MPGN Treatment: Innovations and Implications for Adults and Adolescents Prof. Dr. med. Uyen Huynh-Do Prof. Dr. med. Fadi Fakhouri Prof. Dr. med. Wesley Hayes
13.00–14.00	Lunch break	
14.00–14.45	Picture Challenge	
14.45–15.30	State of the Art: Kidney Care in an unequal World Dr. sc. med. Valerie Luyckx	
	Club Casino Room 3	
10.15–11.00	Elevator Pitch	
11.30–12.00	Swiss Dialysis Registry	

■ | Invitation «SGN-SSN Networking-Dinner»



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

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



It's time to raise the standard

In Lupus care

Systemic lupus erythematosus (SLE)

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

Lupus Nephritis (LN)

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

MY
ORGANS
ARE AT
RISK

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

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

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

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

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

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

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This fictitious patient image is for illustrative purposes only

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

Benlysta
(belimumab)

10+
YEARS

GSK

Notes

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

■ | Plan of exhibition



■ | Exhibitors

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

■ | Association

Association pour l'Information et la Recherche sur
les maladies rénales Génétiques (AIRG)



www.airg-suisse.org

Swiss renal registry and quality assessment program (srrgap)



Verband Nierenpatienten Schweiz (VNPS)



www.nierenpatienten.ch

Schweizerische Nierenstiftung



www.nierenstiftung.ch

Young Swiss Nephrology



www.youngswissnephrology.ch

■ | Advertisements by

Sanofi-Aventis (Schweiz) AG

Ascendis Pharma

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■ | Sponsored parallel symposia



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



Ascendis Pharma
Thursday, December 4, 2025 – 13.45–14.30
Room «Ballsaal»



AstraZeneca AG
Thursday, December 4, 2025 – 14.30–15.15
Room «Ballsaal»



Boehringer Ingelheim (Schweiz) GmbH
Thursday, December 4, 2025 – 11.30–12.15
Room «Theatersaal»



CSL Vifor
Thursday, December 4, 2025 – 11.30–12.15
Room «Ballsaal»



GlaxoSmithKline AG
Thursday, December 4, 2025 – 12.15–13.00
Room «Ballsaal»



Novartis Pharma Schweiz AG
Friday, December 5, 2025 – 11.30–12.15
Room «Ballsaal»



Otsuka Pharmaceutical (Switzerland) GmbH
Friday, December 5, 2025 – 10.15–11.00
Room «Theatersaal»



Roche Pharma (Schweiz) AG
Friday, December 5, 2025 – 10.15–11.00
Room «Ballsaal»



Sanofi-Aventis (Schweiz) AG
Thursday, December 4, 2025 – 14.30–15.15
Room «Theatersaal»



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



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

■ | Awards 2025 / SGN-SSN



Publication Award

CSL Vifor

Poster Awards



YSN Awards

■ | Kind thanks to all our sponsors



■ | Kind thanks to all our sponsors

Medtronic



■ | Save the date : SGN-SSN congress 2025

We would like to invite you to the

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



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

We look forward welcoming you in Berne next year!





For all Fabry patients, think **Fabrazyme®**

- at any stage of life^{*1-3}
- independent of gender, genotype or phenotype¹⁻³



The treatment for long-term^{4,5}



Nephroprotection



Cardioprotection



Neuroprotection

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

^{*} from 8 years old

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

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

sanofi

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