

REFERENCES

- [1] Ahn SV, Vonesh E, Han SH. Survival advantage of icodextrin peritoneal dialysis solution in a time-dependent model. Am J Kidney Dis 61 (Feb 2013): 351-2.
- [2] Ayuzawa N, Ishibashi Y, Takazawa Y, Kume H, Fujita T. Peritoneal morphology after long-term peritoneal dialysis with biocompatible fluid: recent clinical practice in Japan. Perit Dial Int 32 (Mar-Apr 2012): 159-67.
- [3] Diaz-Buxo J, Clark SC, Ho CH, Jensen LE. New pH-neutral peritoneal dialysis solution, low in glucose degradation products, in a double-chamber bag. Adv Perit Dial 26 (2010): 28-32.
- [4] Qi H, Xu C, Yan H, Ma J. Comparison of icodextrin and glucose solutions for long dwell exchange in peritoneal dialysis: a meta-analysis of randomized controlled trials. Perit Dial Int 31 (Mar-Apr 2011): 179-88.
- [5] Legrain M. [The history of peritoneal dialysis]. Rev Prat 41 (May 21 1991): 1388-90.
- [6] Twardowski ZJ. History and development of the access for peritoneal dialysis. Contrib Nephrol 142 (2004): 387-401.
- [7] Shetty A, Oreopoulos DG. Connecting devices in CAPD and their impact on peritonitis. J Postgrad Med 40 (Jul-Sep 1994): 179-84.
- [8] Miller D. Peritoneal dialysis as the treatment of choice for pediatric patients. CCPD is the therapy of choice for pediatric patients with ESRD. Nephrol Nurs J 33 (Mar-Apr 2006): 219-20.
- [9] Chou CY, Wang IK, Liu JH, Lin HH, Wang SM, Huang CC. Comparing survival between peritoneal dialysis and hemodialysis treatment in ESRD patients with chronic hepatitis C infection. Perit Dial Int 30 (Jan-Feb 2010): 86-90.
- [10] Quiros-Ganga PL, Remon-Rodriguez C. Achieving better results for peritoneal dialysis in recent years. Nefrologia 32 (Sep 26 2012): 587-96.
- [11] Takatori Y, Akagi S, Sugiyama H, Inoue J, Kojo S, Morinaga H, et al. Icodextrin increases technique survival rate in peritoneal dialysis patients with

- diabetic nephropathy by improving body fluid management: a randomized controlled trial. Clin J Am Soc Nephrol 6 (Jun 2011): 1337-44.
- [12] Vacaroiu IA, Radulescu D, Ciocalteu A, Peride I, Ardeleanu S, Checherita IA. Functional status of chronic renal replacement therapy in elderly patients--comparison between hemodialysis and peritoneal dialysis. Rev Med Chir Soc Med Nat Iasi 116 (Apr-Jun 2012): 375-82.
- [13] Ekelund B, Jorgensen JI. [Continuous ambulatory peritoneal dialysis, CAPD. 18-month experience with a new form of treatment of chronic renal failure]. Ugeskr Laeger 144 (Sep 20 1982): 2776-9.
- [14] Fernandez MA, Ortiz AM, Valenzuela M, Morales RA. Peritoneal dialysis in chronic renal failure patients over 65 years of age. Adv Perit Dial 20 (2004): 128-31.
- [15] Usta MF, Tuncer M, Baykal A, Ciftcioglu MA, Erdogan T, Koksall IT, et al. Impact of chronic renal failure and peritoneal dialysis fluids on advanced glycation end product and iNOS levels in penile tissue: an experimental study. Urology 59 (Jun 2002): 953-7.
- [16] Lindholm B, Werynski A, Bergstrom J. Kinetics of peritoneal dialysis with glycerol and glucose as osmotic agents. ASAIO Trans 33 (Jan-Mar 1987): 19-27.
- [17] Twardowski ZJ, Nolph KD, McGary TJ, Moore HL. Polyanions and glucose as osmotic agents in simulated peritoneal dialysis. Artif Organs 7 (Nov 1983): 420-7.
- [18] Fernandez-Reyes MJ, Bajo MA, Del Peso G, Ossorio M, Diaz R, Carretero B, et al. The influence of initial peritoneal transport characteristics, inflammation, and high glucose exposure on prognosis for peritoneal membrane function. Perit Dial Int 32 (Nov-Dec 2012): 636-44.
- [19] Iglesias-de la Cruz MC, Ziyadeh FN, Isono M, Kouahou M, Han DC, Kalluri R, et al. Effects of high glucose and TGF-beta1 on the expression of collagen

- IV and vascular endothelial growth factor in mouse podocytes. Kidney Int 62 (Sep 2002): 901-13.
- [20] Massucco P, Mattiello L, Russo I, Traversa M, Doronzo G, Anfossi G, et al. High glucose rapidly activates the nitric oxide/cyclic nucleotide pathway in human platelets via an osmotic mechanism. Thromb Haemost 93 (Mar 2005): 517-26.
- [21] Sitter T, Haslinger B, Mandl S, Fricke H, Held E, Sellmayer A. High glucose increases prostaglandin E2 synthesis in human peritoneal mesothelial cells: role of hyperosmolarity. J Am Soc Nephrol 9 (Nov 1998): 2005-12.
- [22] Carrion B, Perez-Martinez FC, Monteagudo S, Perez-Carrion MD, Gomez-Roldan C, Cena V, et al. Atorvastatin reduces high glucose toxicity in rat peritoneal mesothelial cells. Perit Dial Int 31 (May-Jun 2011): 325-31.
- [23] Park MS, Lee HB. AGE accumulation in peritoneal membrane and cavity during peritoneal dialysis and its effect on peritoneal structure and function. Perit Dial Int 19 Suppl 2 1999): S53-7.
- [24] Hung KY, Lin TJ, Tsai TJ, Chen WY. Impact of peritoneal membrane transport on technique failure and patient survival in a population on automated peritoneal dialysis. ASAIO J 45 (Nov-Dec 1999): 568-73.
- [25] Krediet RT. Prevention and treatment of peritoneal dialysis membrane failure. Adv Ren Replace Ther 5 (Jul 1998): 212-7.
- [26] Neiberger RE. Peritoneal membrane failure in children on peritoneal dialysis. Adv Perit Dial 11 1995): 277-80.
- [27] Oreopoulos DG, Robson M, Faller B, Ogilvie R, Rapoport A, deVeber GA. Continuous ambulatory peritoneal dialysis: a new era in the treatment of chronic renal failure. Clin Nephrol 11 (Mar 1979): 125-8.
- [28] Marshall J, Jennings P, Scott A, Fluck RJ, McIntyre CW. Glycemic control in diabetic CAPD patients assessed by continuous glucose monitoring system (CGMS). Kidney Int 64 (Oct 2003): 1480-6.

- [29] Abdel-Rahman EM, Wakeen M, Zimmerman SW. Characteristics of long-term peritoneal dialysis survivors: 18 years experience in one center. Perit Dial Int 17 (Mar-Apr 1997): 151-6.
- [30] Grzegorzewska AE. What is new in peritoneal dialysis in the years 2003-2004. Rocz Akad Med Bialymst 49 2004): 170-3.
- [31] Wu HY, Hung KY, Huang TM, Hu FC, Peng YS, Huang JW, et al. Safety issues of long-term glucose load in patients on peritoneal dialysis--a 7-year cohort study. PLoS One 7 2012): e30337.
- [32] Erixon M, Wieslander A, Linden T, Carlsson O, Forsback G, Svensson E, et al. Take care in how you store your PD fluids: actual temperature determines the balance between reactive and non-reactive GDPs. Perit Dial Int 25 (Nov-Dec 2005): 583-90.
- [33] Gong TW, Horwitz BA, Stern JS. The effects of 2-deoxy-D-glucose and sympathetic denervation of brown fat GDP binding in Sprague-Dawley rats. Life Sci 46 1990): 1037-44.
- [34] Himmele R, Jensen L, Fenn D, Ho CH, Sawin DA, Diaz-Buxo JA. A new neutral-pH low-GDP peritoneal dialysis fluid. Perit Dial Int 32 (Jul-Aug 2012): 444-52.
- [35] Krishnan M, Tam P, Wu G, Breborowicz A, Oreopoulos DG. Glucose degradation products (GDP's) and peritoneal changes in patients on chronic peritoneal dialysis: will new dialysis solutions prevent these changes? Int Urol Nephrol 37 2005): 409-18.
- [36] Baroni G, Schuinski AF, Berticelli PT, Silva MA, Gouveia DS, Pecoits Filho R, et al. The influence of simvastatin in induced peritoneal fibrosis in rats by peritoneal dialysis solution with glucosis 4.25%. Acta Cir Bras 27 (Apr 2012): 350-6.
- [37] Kawanishi K, Honda K, Tsukada M, Oda H, Nitta K. Neutral Solution Low in Glucose Degradation Products Is Associated with Less Peritoneal

- Fibrosis and Vascular Sclerosis in Patients Receiving Peritoneal Dialysis. Perit Dial Int (Nov 1 2012).
- [38] Rippe B, Levin L. Computer simulations of ultrafiltration profiles for an icodextrin-based peritoneal fluid in CAPD. Kidney Int 57 (Jun 2000): 2546-56.
- [39] Nishimura K, Kamiya Y, Miyamoto K, Nomura S, Horiuchi T. Molecular weight of polydisperse icodextrin effects its oncotic contribution to water transport. J Artif Organs 11 2008): 165-9.
- [40] Rippe B, Venturoli D. Optimum electrolyte composition of a dialysis solution. Perit Dial Int 28 Suppl 3 (Jun 2008): S131-6.
- [41] Posthuma N, ter Wee PM, Donker AJ, Oe PL, Peers EM, Verbrugh HA. Assessment of the effectiveness, safety, and biocompatibility of icodextrin in automated peritoneal dialysis. The Dextrin in APD in Amsterdam (DIANA) Group. Perit Dial Int 20 Suppl 2 2000): S106-13.
- [42] Alscher DM, Biegger D, Mettang T, van der Kuip H, Kuhlmann U, Fritz P. Apoptosis of mesothelial cells caused by unphysiological characteristics of peritoneal dialysis fluids. Artif Organs 27 (Nov 2003): 1035-40.
- [43] Bender TO, Witowski J, Ksiazek K, Jorres A. Comparison of icodextrin- and glucose-based peritoneal dialysis fluids in their acute and chronic effects on human peritoneal mesothelial cells. Int J Artif Organs 30 (Dec 2007): 1075-82.
- [44] Cendoroglo M, Sundaram S, Jaber BL, Pereira BJ. Effect of glucose concentration, osmolality, and sterilization process of peritoneal dialysis fluids on cytokine production by peripheral blood mononuclear cells and polymorphonuclear cell functions in vitro. Am J Kidney Dis 31 (Feb 1998): 273-82.
- [45] Chhabra D, Nash K. Icodextrin: an alternative peritoneal dialysis fluid. Expert Opin Drug Metab Toxicol 4 (Nov 2008): 1455-64.

- [46] Cho Y, Badve SV, Hawley CM, Wiggins K, Johnson DW. Biocompatible peritoneal dialysis fluids: clinical outcomes. Int J Nephrol 2012 2012): 812609.
- [47] de Fijter CW, Verbrugh HA, Oe LP, Heezius E, Donker AJ, Verhoef J, et al. Biocompatibility of a glucose-polymer-containing peritoneal dialysis fluid. Am J Kidney Dis 21 (Apr 1993): 411-8.
- [48] Mortier S, De Vriese AS, McLoughlin RM, Topley N, Schaub TP, Passlick-Deetjen J, et al. Effects of conventional and new peritoneal dialysis fluids on leukocyte recruitment in the rat peritoneal membrane. J Am Soc Nephrol 14 (May 2003): 1296-306.
- [49] Musi B, Braide M, Carlsson O, Wieslander A, Albrektsson A, Ketteler M, et al. Biocompatibility of peritoneal dialysis fluids: long-term exposure of nonuremic rats. Perit Dial Int 24 (Jan-Feb 2004): 37-47.
- [50] Thomas S, Schenk U, Fischer FP, Mettang T, Passlick-Deetjen J, Kuhlmann U. In vitro effects of glucose polymer-containing peritoneal dialysis fluids on phagocytic activity. Am J Kidney Dis 29 (Feb 1997): 246-53.
- [51] Klarenbach S, Manns B. Economic evaluation of dialysis therapies. Semin Nephrol 29 (Sep 2009): 524-32.
- [52] Adachi Y, Nakagawa Y, Nishio A. Icodextrin preserves residual renal function in patients treated with automated peritoneal dialysis. Perit Dial Int 26 (May-Jun 2006): 405-7.
- [53] Amici G, Da Rin G, Agostini A, Velo S, Bocci C. Ten years after MIDAS: icodextrin lights and shadows. Contrib Nephrol 2003): 76-81.
- [54] Basile C, Chimienti D, Bruno A, Cocola S, Libutti P, Teutonico A, et al. Efficacy of peritoneal dialysis with icodextrin in the long-term treatment of refractory congestive heart failure. Perit Dial Int 29 (Jan-Feb 2009): 116-8.
- [55] Cooker LA, Choo CG, Luneburg P, Lamela J, Holmes CJ. Effect of icodextrin peritoneal dialysis solution on cell proliferation in vitro. Adv Perit Dial 15 (1999): 17-20.

- [56] Finkelstein F, Healy H, Abu-Alfa A, Ahmad S, Brown F, Gehr T, et al. Superiority of icodextrin compared with 4.25% dextrose for peritoneal ultrafiltration. J Am Soc Nephrol 16 (Feb 2005): 546-54.
- [57] Peng YM, Shu ZJ, Xiao L, Sun L, Tang WB, Huang Y, et al. A new non-uremic rat model of long-term peritoneal dialysis. Physiol Res 60 (2011): 157-64.
- [58] Ahmad M, Shah H, Pliakogiannis T, Oreopoulos DG. Prevention of membrane damage in patient on peritoneal dialysis with new peritoneal dialysis solutions. Int Urol Nephrol 39 (2007): 299-312.
- [59] Agrawal A, Nolph KD. Management of high peritoneal transporters. Perit Dial Int 20 Suppl 2 (2000): S160-5.
- [60] Chung SH, Heimbürger O, Lindholm B. Poor outcomes for fast transporters on PD: the rise and fall of a clinical concern. Semin Dial 21 (Jan-Feb 2008): 7-10.
- [61] Freida P, Galach M, Divino Filho JC, Werynski A, Lindholm B. Combination of crystalloid (glucose) and colloid (icodextrin) osmotic agents markedly enhances peritoneal fluid and solute transport during the long PD dwell. Perit Dial Int 27 (May-Jun 2007): 267-76.
- [62] Ankur G, Mohan B. Icodextrin and skin rash: Unusual presentation. Indian J Nephrol 22 (Jan 2012): 62-3.
- [63] Davies SJ, Garcia Lopez E, Woodrow G, Donovan K, Plum J, Williams P, et al. Longitudinal relationships between fluid status, inflammation, urine volume and plasma metabolites of icodextrin in patients randomized to glucose or icodextrin for the long exchange. Nephrol Dial Transplant 23 (Sep 2008): 2982-8.
- [64] Abraham G, Khanna P, Mathew M, Pushpkala P, Mehrotra A, Sairam A, et al. How to make peritoneal dialysis affordable in developing countries. Contrib Nephrol 163 (2009): 243-9.
- [65] Nayak KS, Prabhu MV, Sinoj KA, Subhramanyam SV, Sridhar G. Peritoneal dialysis in developing countries. Contrib Nephrol 163 (2009): 270-7.

- [66] Breborowicz A, Rodela H, Oreopoulos DG. Toxicity of osmotic solutes on human mesothelial cells in vitro. Kidney Int 41 (May 1992): 1280-5.
- [67] Ha H, Cha MK, Choi HN, Lee HB. Effects of peritoneal dialysis solutions on the secretion of growth factors and extracellular matrix proteins by human peritoneal mesothelial cells. Perit Dial Int 22 (Mar-Apr 2002): 171-7.
- [68] Inagi R, Miyata T, Yamamoto T, Suzuki D, Urakami K, Saito A, et al. Glucose degradation product methylglyoxal enhances the production of vascular endothelial growth factor in peritoneal cells: role in the functional and morphological alterations of peritoneal membranes in peritoneal dialysis. FEBS Lett 463 (Dec 17 1999): 260-4.
- [69] Wieslander AP, Kjellstrand PT, Rippe B. Heat sterilization of glucose-containing fluids for peritoneal dialysis: biological consequences of chemical alterations. Perit Dial Int 15 (1995): S52-9; discussion S9-60.
- [70] Drawz PE, Rosenthal N, Babineau DC, Rahman M. Nighttime hospital blood pressure--a predictor of death, ESRD, and decline in GFR. Ren Fail 32 (2010): 1036-43.
- [71] Sharma SK, Zou H, Togtokh A, Ene-Iordache B, Carminati S, Remuzzi A, et al. Burden of CKD, proteinuria, and cardiovascular risk among Chinese, Mongolian, and Nepalese participants in the International Society of Nephrology screening programs. Am J Kidney Dis 56 (Nov 2010): 915-27.
- [72] Holley JL. Advance care planning in CKD/ESRD: an evolving process. Clin J Am Soc Nephrol 7 (Jun 2012): 1033-8.
- [73] Tanner RM, Gutierrez OM, Judd S, McClellan W, Bowling CB, Bradbury BD, et al. Geographic Variation in CKD Prevalence and ESRD Incidence in the United States: Results From the Reasons for Geographic and Racial Differences in Stroke (REGARDS) Study. Am J Kidney Dis (Dec 7 2012).
- [74] Weijnen TJ, van Hamersvelt HW, Just PM, Struijk DG, Tjandra YI, ter Wee PM, et al. Economic impact of extended time on peritoneal dialysis as a result of

- using polyglucose: the application of a Markov chain model to forecast changes in the development of the ESRD programme over time. Nephrol Dial Transplant 18 (Feb 2003): 390-6.
- [75]. Beddhu S, Allen-Brady K, Cheung AK, Horne BD, Bair T, Muhlestein JB, et al. Impact of renal failure on the risk of myocardial infarction and death. Kidney Int 62 (Nov 2002): 1776-83.
- [76] Sniderman AD, Solhpour A, Alam A, Williams K, Sloand JA. Cardiovascular death in dialysis patients: lessons we can learn from AURORA. Clin J Am Soc Nephrol 5 (Feb 2010): 335-40.
- [77] Babayev R, Whaley-Connell A, Kshirsagar A, Klemmer P, Navaneethan S, Chen SC, et al. Association of Race and Body Mass Index With ESRD and Mortality in CKD Stages 3-4: Results From the Kidney Early Evaluation Program (KEEP). Am J Kidney Dis (Dec 20 2012).
- [78] Kher V. End-stage renal disease in developing countries. Kidney Int 62 (Jul 2002): 350-62.
- [79] Prasad N, Gupta A, Mathew M, Abraham G. Access-related complications in peritoneal dialysis in developing countries. Adv Ren Replace Ther 9 (Apr 2002): 144-8.
- [80] Moncrief JW, Popovich RP, Dasgupta M, Costerton JW, Simmons E, Moncrief B. Reduction in peritonitis incidence in continuous ambulatory peritoneal dialysis with a new catheter and implantation technique. Perit Dial Int 13 Suppl 2 1993): S329-31.
- [81] Yim HJ, Yeon JE, Byun KS, Lee CH, Choi SY, Kim SK. Laparoscopic resection of HCC implanted in the peritoneal cavity: a case detected by PET after hepatic resection. HepatoGastroenterology 55 (Sep-Oct 2008): 1549-52.
- [82] Flessner M, Henegar J, Bigler S, Genous L. Is the peritoneum a significant transport barrier in peritoneal dialysis? Perit Dial Int 23 (Nov-Dec 2003): 542-9.

- [83] Flessner MF, Lofthouse J, Zakaria ER. Improving contact area between the peritoneum and intraperitoneal therapeutic solutions. J Am Soc Nephrol 12 (Apr 2001): 807-13.
- [84]. Abernethy NJ, Chin W, Hay JB, Rodela H, Oreopoulos D, Johnston MG. Lymphatic drainage of the peritoneal cavity in sheep. Am J Physiol 260 (Mar 1991): F353-8.
- [85] Cukuranovic R, Raicevic R, Kostic S, Veljkovic S, Aracki S, Stojanovic M, et al. Anatomic and physiologic characteristics of the peritoneal cavity with reference to peritoneal dialysis]. Srp Arh Celok Lek 124 Suppl 1 1996): 142-4.
- [86] Kruger S, Greve DW, Schueler FW. The absorption of fluid from the peritoneal cavity. Arch Int Pharmacodyn Ther 137 (May 1 1962): 173-8.
- [87] Mactier RA, Khanna R. Absorption of fluid and solutes from the peritoneal cavity. Theoretic and therapeutic implications and applications. ASAIO Trans 35 (Apr-Jun 1989): 122-31.
- [88] Ryu HM, Oh EJ, Park SH, Kim CD, Choi JY, Cho JH, et al. Aquaporin 3 expression is up-regulated by TGF-beta1 in rat peritoneal mesothelial cells and plays a role in wound healing. Am J Pathol 181 (Dec 2012): 2047-57.
- [89] Zhai Y, Bloch J, Homme M, Schaefer J, Hackert T, Philippin B, et al. Buffer-dependent regulation of aquaporin-1 expression and function in human peritoneal mesothelial cells. Pediatr Nephrol 27 (Jul 2012): 1165-77.
- [90] Ikeguchi M. Water transport in aquaporins: molecular dynamics simulations. Front Biosci 14 2009): 1283-91.
- [91] Pecoits-Filho R. The peritoneal cavity: a room with a view to the endothelium. Perit Dial Int 25 (Sep-Oct 2005): 432-4.
- [92] Schilte MN, Fabbrini P, Wee PM, Keuning ED, Zareie M, Tangelder GJ, et al. Peritoneal dialysis fluid bioincompatibility and new vessel formation

- promote leukocyte-endothelium interactions in a chronic rat model for peritoneal dialysis. Microcirculation 17 (May 2010): 271-80.
- [93] Chen, H, Diana JN. A two pore size distribution model for transcapillary exchange of substances. Adv Exp Med Biol 180 (1984): 109-18.
- [94] Conhaim RL, Harms BA. A simplified two-pore filtration model explains the effects of hypoproteinemia on lung and soft tissue lymph flux in awake sheep. Microvasc Res 44 (Jul 1992): 14-26.
- [95] Rippe B. A three-pore model of peritoneal transport. Perit Dial Int 13 Suppl 2 (1993): S35-8.
- [96] Rippe B. Free water transport, small pore transport and the osmotic pressure gradient three-pore model of peritoneal transport. Nephrol Dial Transplant 23 (Jul 2008): 2147-53.
- [97] Rippe B. Does an endothelial surface layer contribute to the size selectivity of the permeable pathways of the three-pore model? Perit Dial Int 28 (Jan-Feb 2008): 20-4.
- [98] Rippe B, Davies S. Permeability of peritoneal and glomerular capillaries: what are the differences according to pore theory? Perit Dial Int 31 (May-Jun 2011): 249-58.
- [99] Agre P. Molecular physiology of water transport: aquaporin nomenclature workshop. Mammalian aquaporins. Biol Cell 89 (Aug 1997): 255-7.
- [100] Agre P. Membrane water transport and aquaporins: looking back. Biol Cell 97 (Jun 2005): 355-6.
- [101] Devuyst O, Yool AJ. Aquaporin-1: new developments and perspectives for peritoneal dialysis. Perit Dial Int 30 (Mar-Apr 2010): 135-41.
- [102] Kuboshima S, Ogimoto G, Sakurada T, Fujino T, Sato T, Yasuda T, et al. Hyperosmotic stimuli induces recruitment of aquaporin-1 to plasma membrane in cultured rat peritoneal mesothelial cells. Adv Perit Dial 17 (2001): 47-52.

- [103] Ni J, Verbavatz JM, Rippe A, Boisdé I, Moulin P, Rippe B, et al. Aquaporin-1 plays an essential role in water permeability and ultrafiltration during peritoneal dialysis. Kidney Int 69 (May 2006): 1518-25.
- [104] Beelen RH, Oosterling SJ, van Egmond M, van den Born J, Zareie M. Omental milky spots in peritoneal pathophysiology (spots before your eyes). Perit Dial Int 25 (Jan-Feb 2005): 30-2.
- [105] Di Paolo N, Sacchi G, Garosi G, Sansoni E, Bargagli L, Ponzo P, et al. Omental milky spots and peritoneal dialysis--review and personal experience. Perit Dial Int 25 (Jan-Feb 2005): 48-57.
- [106] Chang CC, Hung CH, Chen HL, Hwang KL, Lin CY. Peritoneal transport characteristics and dwelling time significantly impact ghrelin clearance in peritoneal dialysis patients. Nephrol Dial Transplant 22 (Jan 2007): 224-8.
- [107] Mistry CD, Gokal R. Can ultrafiltration occur with a hypo-osmolar solution in peritoneal dialysis?: The role for 'colloid' osmosis. Clin Sci (Lond) 85 (Oct 1993): 495-500.
- [108] Mistry CD, Gokal R, Peers E. A randomized multicenter clinical trial comparing isosmolar icodextrin with hyperosmolar glucose solutions in CAPD. MIDAS Study Group. Multicenter Investigation of Icodextrin in Ambulatory Peritoneal Dialysis. Kidney Int 46 (Aug 1994): 496-503.
- [109] Asghar RB, Diskin AM, Spanel P, Smith D, Davies SJ. Influence of convection on the diffusive transport and sieving of water and small solutes across the peritoneal membrane. J Am Soc Nephrol 16 (Feb 2005): 437-43.
- [110] Bammens B. Urea and uremic solutes: how does peritoneal dialysis work? Semin Nephrol 31 (Mar 2011): 127-37.
- [111] Krediet RT, Douma CE, Ho-dac-Pannekeet MM, Imholz AL, Zemel D, Zweers M, et al. Impact of different dialysis solutions on solute and water transport. Perit Dial Int 17 Suppl 2 1997): S17-26.

- [112] Rippe B, Stelin G. How does peritoneal dialysis remove small and large molecular weight solutes? Transport pathways: fact and myth. Adv Perit Dial 6 1990): 13-8.
- [113] Selgas R, Bajo MA, Cirugeda A, del Peso G, Valdes J, Castro MJ, et al. Ultrafiltration and small solute transport at initiation of PD: questioning the paradigm of peritoneal function. Perit Dial Int 25 (Jan-Feb 2005): 68-76.
- [114] Flessner MF. Peritoneal ultrafiltration: physiology and failure. Contrib Nephrol 163 2009): 7-14.
- [115] Ruhi C, Kocak H, Yavuz A, Suleymanlar G, Ersoy FF. Use of peritoneal ultrafiltration in the elderly refractory congestive heart failure patients. Int Urol Nephrol 44 (Jun 2012): 963-9.
- [116] Waniewski J, Heimbürger O, Werynski A, Park MS, Lindholm B. Diffusive and convective solute transport in peritoneal dialysis with glucose as an osmotic agent. Artif Organs 19 (Apr 1995): 295-306.
- [117] Grzelak T, Czyzewska-Majchrzak L, Kramkowska M, Wojciechowska K, Szary B, Witmanowski H, et al. Influence of prednisolone on glucose and uric acid transport across peritoneal membrane in vitro. Adv Perit Dial 28 2012): 21-5.
- [118] Haraldsson B, Ekholm C, Rippe B. Importance of molecular charge for the passage of endogenous macromolecules across continuous capillary walls, studied by serum clearance of lactate dehydrogenase (LDH) isoenzymes. Acta Physiol Scand 117 (Jan 1983): 123-30.
- [119] Leypoldt JK. Evaluation of peritoneal membrane permeability. Adv Ren Replace Ther 2 (Jul 1995): 265-73.
- [120] Leypoldt JK, Blindauer KM. Peritoneal solvent drag reflection coefficients are within the physiological range. Blood Purif 12 1994): 327-36.
- [121] Lameire N, Mortier S, De Vriese A. Peritoneal microcirculation. Contrib Nephrol 2003): 56-69.

- [122] Miller FN, Joshua IG, Harris PD, Wiegman DL, Jauchem JR. Peritoneal dialysis solutions and the microcirculation. Contrib Nephrol 17 (1979): 51-8.
- [123] Rippe B, Rosengren BI, Venturoli D. The peritoneal microcirculation in peritoneal dialysis. Microcirculation 8 (Oct 2001): 303-20.
- [124] Maher JF, Cassetta M, Shea C, Hohnadel DC. Peritoneal dialysis in rabbits. A study of transperitoneal theophylline flux and peritoneal permeability. Nephron 20 (1978): 18-23.
- [125] Gotloib L, Waisbrut V, Shostak A, Kushnier R. Acute and long-term changes observed in imprints of mouse mesothelium exposed to glucose-enriched, lactated, buffered dialysis solutions. Nephron 70 (1995): 466-77.
- [126] The peritoneal equilibration test. Nephrol Nurs J 32 (Jul-Aug 2005): 452-3.
- [127] Cano F, Sanchez L, Rebori A, Quiroz L, Delucchi A, Delgado I, et al. The short peritoneal equilibration test in pediatric peritoneal dialysis. Pediatr Nephrol 25 (Oct 2010): 2159-64.
- [128] Cuevas M, Zambrano P, Dinamarca H, Gilbert M, Cano F. Short PET in pediatric peritoneal dialysis. Pediatr Nephrol 23 (Oct 2008): 1853-8.
- [129] Rumpfeld M, McDonald SP, Johnson DW. Higher peritoneal transport status is associated with higher mortality and technique failure in the Australian and New Zealand peritoneal dialysis patient populations. J Am Soc Nephrol 17 (Jan 2006): 271-8.
- [130] Yang X, Fang W, Bargman JM, Oreopoulos DG. High peritoneal permeability is not associated with higher mortality or technique failure in patients on automated peritoneal dialysis. Perit Dial Int 28 (Jan-Feb 2008): 82-92.
- [131] Al-wakeel J, Al-Ghonaim M, Al-Suwaida A, Askar A, Usama S, Feraz N, et al. Peritoneal membrane characteristics in patients on peritoneal dialysis. Saudi J Kidney Dis Transpl 22 (Jan 2011): 49-53.

- [132] Andreoli SP, Langefeld CD, Stadler S, Smith P, Sears A, West K. Risks of peritoneal membrane failure in children undergoing long-term peritoneal dialysis. Pediatr Nephrol 7 (Oct 1993): 543-7.
- [133] Coronel F, Cigarran S, Gomis A, Rodriguez-Cubillo B, Herrero JA, Delgado P, et al. Changes in peritoneal membrane permeability and proteinuria in patients on peritoneal dialysis after treatment with paricalcitol - a preliminary study. Clin Nephrol 78 (Aug 2012): 93-9.
- [134] Waniewski J, Sobiecka D, Debowska M, Heimbürger O, Weryński A, Lindholm B. Fluid and solute transport in CAPD patients before and after permanent loss of ultrafiltration capacity. Int J Artif Organs 28 (Oct 2005): 976-86.
- [135] Waniewski J, Debowska M, Lindholm B. Water and solute transport through different types of pores in peritoneal membrane in CAPD patients with ultrafiltration failure. Perit Dial Int 29 (Nov-Dec 2009): 664-9.
- [136] Bargman JM. Peritoneal dialysis should be the first choice for renal replacement therapy in the elderly. Semin Dial 25 (Nov-Dec 2012): 668-70.
- [137] Chiu YW, Jiwakanon S, Lukowsky L, Duong U, Kalantar-Zadeh K, Mehrotra R. An update on the comparisons of mortality outcomes of hemodialysis and peritoneal dialysis patients. Semin Nephrol 31 (Mar 2011): 152-8.
- [138] Han SH, Ahn SV, Yun JY, Tranaeus A, Han DS. Effects of icodextrin on patient survival and technique success in patients undergoing peritoneal dialysis. Nephrol Dial Transplant 27 (May 2012): 2044-50.
- [139] Jose MD, Johnson DW, Mudge DW, Tranaeus A, Voss D, Walker R, et al. Peritoneal dialysis practice in Australia and New Zealand: a call to action. Nephrology (Carlton) 16 (Jan 2011): 19-29.
- [140] Krediet RT. Advances in peritoneal dialysis. Minerva Urol Nefrol 59 (Sep 2007): 251-60.
- [141] Kuriyama S. Peritoneal dialysis in patients with diabetes: are the benefits greater than the disadvantages? Perit Dial Int 27 Suppl 2 (Jun 2007): S190-5.

- [142] Lai KN, Lam MF, Leung JC, Chan LY, Lam CW, Chan IH, et al. A study of the clinical and biochemical profile of peritoneal dialysis fluid low in glucose degradation products. Perit Dial Int 32 (May-Jun 2012): 280-91.
- [143] le Poole CY, Welten AG, ter Wee PM, Paauw NJ, Djorai AN, Valentijn RM, et al. A peritoneal dialysis regimen low in glucose and glucose degradation products results in increased cancer antigen 125 and peritoneal activation. Perit Dial Int 32 (May-Jun 2012): 305-15.
- [144] Lobbedez T, Boissinot L, Ficheux M, Castrale C, Ryckelynck JP. How to avoid technique failure in peritoneal dialysis patients? Contrib Nephrol 178 (2012): 53-7.
- [145] Ronco C, Diaz-Buxo JA. Automated peritoneal dialysis. Revisitation of the past or beginning of a new PD era? Nephron 87 (Jan 2001): 1-7.
- [146] Sueyoshi K, Inoue T, Kojima E, Sato T, Tsuda M, Kikuta T, et al. Clinical presentation in patients more than 80 years of age at the start of peritoneal dialysis. Adv Perit Dial 27 (2011): 71-6.
- [147] Taveras AE, Bekui AM, Gorban-Brennan N, Raducu R, Finkelstein FO. Peritoneal dialysis in patients 75 years of age and older--a 22-year experience. Adv Perit Dial 28 (2012): 84-8.
- [148] Czyzewska K, Szary B, Grzegorzewska A. [Glucose polymer (icodextrin) as a component of fluid for peritoneal dialysis]. Pol Arch Med Wewn 99 (May 1998): 417-22.
- [149] Freida P, Issad B, Dratwa M, Lobbedez T, Wu L, Leyboldt JK, et al. A combined crystalloid and colloid pd solution as a glucose-sparing strategy for volume control in high-transport apd patients: a prospective multicenter study. Perit Dial Int 29 (Jul-Aug 2009): 433-42.
- [150] Johnson DW, Brown FG, Clarke M, Boudville N, Elias TJ, Foo MW, et al. The effect of low glucose degradation product, neutral pH versus standard peritoneal dialysis solutions on peritoneal membrane function: the balANZ trial. Nephrol Dial Transplant 27 (Dec 2012): 4445-53.

- [151] Witowski J, Bender TO, Wisniewska-Elnur J, Ksiazek K, Passlick-Deetjen J, Breborowicz A, et al. Mesothelial toxicity of peritoneal dialysis fluids is related primarily to glucose degradation products, not to glucose per se. Perit Dial Int 23 (Jul-Aug 2003): 381-90.
- [152] Krediet RT, Van Esch S, Smit W, Michels WM, Zweers MM, Ho-Dac-Pannekeet MM, et al. Peritoneal membrane failure in peritoneal dialysis patients. Blood Purif 20 (2002): 489-93.
- [153] Cooker LA, Holmes CJ, Hoff CM. Biocompatibility of icodextrin. Kidney Int Suppl (Oct 2002): S34-45.
- [154] Dai HL, Lin AW, Qian JQ, Fang W, Ni ZH, Cao LO, et al. [Icodextrin improve angiogenesis of peritoneal membrane in continuous ambulatory peritoneal dialysis patients]. Zhonghua Yi Xue Za Zhi 90 (Nov 2 2010): 2843-7.
- [155] Krediet RT. Effects of icodextrin on the peritoneal membrane. Nephrol Dial Transplant 25 (May 2010): 1373-5.
- [156] Babazono T, Nakamoto H, Kasai K, Kuriyama S, Sugimoto T, Nakayama M, et al. Effects of icodextrin on glycemic and lipid profiles in diabetic patients undergoing peritoneal dialysis. Am J Nephrol 27 (2007): 409-15.
- [157] Heimbürger O. Residual renal function, peritoneal transport characteristics and dialysis adequacy in peritoneal dialysis. Kidney Int Suppl 56 (Nov 1996): S47-55.
- [158] Boulanger E, Wautier MP, Gane P, Mariette C, Devuyst O, Wautier JL. The triggering of human peritoneal mesothelial cell apoptosis and oncosis by glucose and glycoxydation products. Nephrol Dial Transplant 19 (Sep 2004): 2208-16.
- [159] Gotloib L, Wajsbrot V, Shostak A. Osmotic agents hamper mesothelial repopulation as seen in the doughnut in vivo model. Perit Dial Int 25 Suppl 3 (Feb 2005): S26-30.

- [160] Katsutani M, Ito T, Masaki T, Kohno N, Yorioka N. Glucose-based PD solution, but not icodextrin-based PD solution, induces plasminogen activator inhibitor-1 and tissue-type plasminogen activator in human peritoneal mesothelial cells via ERK1/2. Ther Apher Dial 11 (Apr 2007): 94-100.
- [161] Honda K, Nitta K, Horita S, Yumura W, Nihei H. Morphological changes in the peritoneal vasculature of patients on CAPD with ultrafiltration failure. Nephron 72 (1996): 171-6.
- [162] Smit W, Parikova A, Struijk DG, Krediet RT. The difference in causes of early and late ultrafiltration failure in peritoneal dialysis. Perit Dial Int 25 Suppl 3 (Feb 2005): S41-5.
- [163] Stegmayr B, Granbom L, Karlsson UM, Lindqvist B. Ultrafiltration failure and dialysate glucose in CAPD. Adv Perit Dial 9 (1993): 62-4.
- [164] Plum J, Schoenicke G, Grabensee B. Osmotic agents and buffers in peritoneal dialysis solution: monocyte cytokine release and in vitro cytotoxicity. Am J Kidney Dis 30 (Sep 1997): 413-22.
- [165] De Vriese AS, Mortier S, Lameire NH. Glucotoxicity of the peritoneal membrane: the case for VEGF. Nephrol Dial Transplant 16 (Dec 2001): 2299-302.
- [166] Jonasson P, Braide M. Acute in vivo toxicity of heat-sterilized glucose peritoneal dialysis fluids to rat peritoneal macrophages. Perit Dial Int 18 (Jul-Aug 1998): 376-81.
- [167] Witowski J, Bender TO, Gahl GM, Frei U, Jorres A. Glucose degradation products and peritoneal membrane function. Perit Dial Int 21 (Mar-Apr 2001): 201-5.
- [168] Bacharaki D, Thodis E, Passadakis P, Kantartzi K, Kriki P, Vargemezis V. Comparative in vitro study of different peritoneal dialysis solutions on cytokine production by peripheral blood mononuclear cells. Nephron Clin Pract 113 (2009): c321-9.

- [169] Zemel D, Krediet RT. Cytokine patterns in the effluent of continuous ambulatory peritoneal dialysis: relationship to peritoneal permeability. Blood Purif 14 (1996): 198-216.
- [170] Zhang AH, Wang G, Zhang DL, Zhang QD, Liu S, Liao Y, et al. Association between VEGF receptors and baseline peritoneal transport status in new peritoneal dialysis patients. Ren Fail 34 (2012): 582-9.
- [171] Zweers MM, de Waart DR, Smit W, Struijk DG, Krediet RT. Growth factors VEGF and TGF-beta1 in peritoneal dialysis. J Lab Clin Med 134 (Aug 1999): 124-32.
- [172] Aroeira LS, Aguilera A, Sanchez-Tomero JA, Bajo MA, del Peso G, Jimenez-Heffernan JA, et al. Epithelial to mesenchymal transition and peritoneal membrane failure in peritoneal dialysis patients: pathologic significance and potential therapeutic interventions. J Am Soc Nephrol 18 (Jul 2007): 2004-13.
- [173] Krediet RT, Lindholm B, Rippe B. Pathophysiology of peritoneal membrane failure. Perit Dial Int 20 Suppl 4 (2000): S22-42.
- [174] Rodriguez-Carmona A, Perez Fontan M. [Inflammation, residual renal function, overhydration, and membrane failure. The Rubik's cube of peritoneal dialysis. Nefrologia 28 Suppl 6 (2008): 33-8.
- [175] Witowski J, Jorres A. Preventing peritoneal fibrosis--an ace up our sleeve? Perit Dial Int 25 (Jan-Feb 2005): 25-9.
- [176] Yenicerioglu Y, Uzelce O, Akar H, Kolatan E, Yilmaz O, Yenisey C, et al. Effects of atorvastatin on development of peritoneal fibrosis in rats on peritoneal dialysis. Ren Fail 32 (2010): 1095-102.
- [177] Parikova A. [Ultrafiltration and prevention of alteration of peritoneal membrane--determinants of success of peritoneal dialysis therapy]. Vnitr Lek 54 (Dec 2008): 1127-8.

- [178] Gotloib L. The mesothelium under the siege of dialysis solutions: old glucose, new glucose, and glucose-free osmotic agents. Adv Perit Dial 25 (2009): 6-10.
- [179] Whitaker D, Papadimitriou JM, Walters MN. The mesothelium: a cytochemical study of "activated" mesothelial cells. J Pathol 136 (Mar 1982): 169-79.
- [180] Rubin J, Clawson M, Planch A, Jones Q. Measurements of peritoneal surface area in man and rat. Am J Med Sci 295 (May 1988): 453-8.
- [181] Alscher DM, Pauli-Magnus C, Kirchgessner J, Kuhlmann U, Mettang T. A new lactate-based, plasticizer-free, neutral peritoneal dialysis fluid provided in a two-compartment system: effect on peripheral leukocyte function. Nephron 86 (Sep 2000): 62-9.
- [182] Cavallini N, Wieslander A, Braide M. Substituting citrate for lactate in peritoneal dialysis fluid improves ultrafiltration in rats. Perit Dial Int 29 (Jan-Feb 2009): 36-43.
- [183] Choi HY, Kim DK, Lee TH, Moon SJ, Han SH, Lee JE, et al. The clinical usefulness of peritoneal dialysis fluids with neutral pH and low glucose degradation product concentration: an open randomized prospective trial. Perit Dial Int 28 (Mar-Apr 2008): 174-82.
- [184] Donovan KL. Inflammation and peritoneal dialysis fluids. Perit Dial Int 27 (Jan-Feb 2007): 98-9.
- [185] Jonasson P, Albrektsson A, Ljungman S, Wieslander A, Braide M. Peritoneal leukocyte survival and respiratory burst responses in patients treated with a low glucose degradation and high pH peritoneal dialysis fluid. Int J Artif Organs 26 (Feb 2003): 121-8.
- [186] Libetta C, Esposito P, Sepe V, Guastoni C, Zucchi M, Meloni F, et al. Effects of different peritoneal dialysis fluids on the TH1/TH2 balance. Eur Cytokine Netw 22 (Mar 2011): 24-31.
- [187] Sundaram S, Cendoroglo M, Cooker LA, Jaber BL, Faict D, Holmes CJ, et al. Effect of two-chambered bicarbonate lactate-buffered peritoneal dialysis

- fluids on peripheral blood mononuclear cell and polymorphonuclear cell function in vitro. Am J Kidney Dis 30 (Nov 1997): 680-9.
- [188] Zareie M, van Lambalgen AA, ter Wee PM, Hekking LH, Keuning ED, Schadee-Eestermans IL, et al. Better preservation of the peritoneum in rats exposed to amino acid-based peritoneal dialysis fluid. Perit Dial Int 25 (Jan-Feb 2005): 58-67.
- [189] Cho KH, Do JY, Park JW, Yoon KW. Effect of icodextrin dialysis solution on body weight and fat accumulation over time in CAPD patients. Nephrol Dial Transplant 25 (Feb 2010): 593-9.
- [190] Davies SJ. Exploring new evidence of the clinical benefits of icodextrin solutions. Nephrol Dial Transplant 21 Suppl 2 (Jul 2006): ii47-50.
- [191] Davies SJ, Woodrow G, Donovan K, Plum J, Williams P, Johansson AC, et al. Icodextrin improves the fluid status of peritoneal dialysis patients: results of a double-blind randomized controlled trial. J Am Soc Nephrol 14 (Sep 2003): 2338-44.
- [192] Douma CE, Hiralall JK, de Waart DR, Struijk DG, Krediet RT. Icodextrin with nitroprusside increases ultrafiltration and peritoneal transport during long CAPD dwells. Kidney Int 53 (Apr 1998): 1014-21.
- [193] Dousdampanis P, Trigka K, Bargman JM. Bimodal solutions or twice-daily icodextrin to enhance ultrafiltration in peritoneal dialysis patients. Int J Nephrol 2013 2013): 424915.
- [194] Dousdampanis P, Trigka K, Chu M, Khan S, Venturoli D, Oreopoulos DG, et al. Two icodextrin exchanges per day in peritoneal dialysis patients with ultrafiltration failure: one center's experience and review of the literature. Int Urol Nephrol 43 (Mar 2011): 203-9.
- [195] Johnson DW, Arndt M, O'Shea A, Watt R, Hamilton J, Vincent K. Icodextrin as salvage therapy in peritoneal dialysis patients with refractory fluid overload. BMC Nephrol 2 (Dec 3 2001): 2.

- [196] Krediet R, Mujais S. Use of icodextrin in high transport ultrafiltration failure. Kidney Int Suppl (Oct 2002): S53-61.
- [197] Kuriyama R, Tranaeus A, Ikegami T. Icodextrin reduces mortality and the drop-out rate in Japanese peritoneal dialysis patients. Adv Perit Dial 22 (2006): 108-10.
- [198] Lambie M, Stompou T, Davies S. Understanding the variability in ultrafiltration obtained with icodextrin. Perit Dial Int 29 (Jul-Aug 2009): 407-11.
- [199] Mistry CD. The beginning of icodextrin. Perit Dial Int 31 Suppl 2 (Mar 2011): S49-52.
- [200] Nakamoto H, Babazono T, Kasai K, Kuriyama S, Sugimoto T, Nakayama M, et al. Successful use of icodextrin in elderly patients on continuous ambulatory peritoneal dialysis. Adv Perit Dial 21 (2005): 168-74.
- [201] Panzer SE, Teitelbaum I. Alternative dialysis strategies with icodextrin. Contrib Nephrol 178 (2012): 11-5.
- [202] Moberly JB, Mujais S, Gehr T, Hamburger R, Sprague S, Kucharski A, et al. Pharmacokinetics of icodextrin in peritoneal dialysis patients. Kidney Int Suppl (Oct 2002): S23-33.
- [203] Rippe B, Stelin G, Haraldsson B. Computer simulations of peritoneal fluid transport in CAPD. Kidney Int 40 (Aug 1991): 315-25.
- [204] Rippe B, Venturoli D. Simulations of osmotic ultrafiltration failure in CAPD using a serial three-pore membrane/fiber matrix model. Am J Physiol Renal Physiol 292 (Mar 2007): F1035-43.
- [205] Leypoldt JK, Hoff C, Piscopo D, Carr SN, Svatek JM, Holmes C. Ultrafiltration Characteristics of Glucose Polymers with Low Polydispersity. Perit Dial Int (Nov 1 2012).
- [206] Garcia-Lopez E, Lindholm B, Davies S. An update on peritoneal dialysis solutions. Nat Rev Nephrol 8 (Apr 2012): 224-33.
- [207] McIntyre CW. Update on peritoneal dialysis solutions. Kidney Int 71 (Mar 2007): 486-90.

- [208] Nikitidou O, Liakopoulos V, Kiparissi T, Divani M, Leivaditis K, Dombros N. Peritoneal dialysis-related infections recommendations: 2010 update. What is new? Int Urol Nephrol 44 (Apr 2012): 593-600.
- [209] Johnson DW, Vincent K, Blizzard S, Rumpsfeld M, Just P. Cost savings from peritoneal dialysis therapy time extension using icodextrin. Adv Perit Dial 19 (2003): 81-5.
- [210] Divino Fiho JC. Allergic reactions to icodextrin in patients with renal failure. Lancet 355 (Apr 15 2000): 1364-5.
- [211] Goldsmith D, Jayawardene S, Sabharwal N, Cooney K. Allergic reactions to the polymeric glucose-based peritoneal dialysis fluid icodextrin in patients with renal failure. Lancet 355 (Mar 11 2000): 897.
- [212] le Poole CY, van Ittersum FJ, Valentijn RM, Teerlink T, Lindholm B, Ter Wee PM, et al. "NEPP" peritoneal dialysis regimen has beneficial effects on plasma CEL and 3-DG, but not pentosidine, CML, and MGO. Perit Dial Int 32 (Jan-Feb 2012): 45-54.
- [213] Ulmer AJ, Scholz W, Ernst M, Brandt E, Flad HD. Isolation and subfractionation of human peripheral blood mononuclear cells (PBMC) by density gradient centrifugation on Percoll. Immunobiology 166 (May 1984): 238-50.
- [214] Gonzalez-Mateo GT, Loureiro-Alvarez J, Rayego-Mateos S, Ruiz-Ortega M, Lopez-Cabrera M, Selgas R, et al. [Animal models of peritoneal dialysis: relevance, difficulties, and future]. Nefrologia 28 Suppl 6 (2008): 17-22.
- [215] Lameire N, Van Biesen W, Mortier S, De Vriese A. What did we learn from animal models in peritoneal dialysis? Contrib Nephrol 150 (2006): 70-6.
- [216] Mortier S, Lameire NH, De Vriese AS. Animal models in peritoneal dialysis research: a need for consensus. Perit Dial Int 25 (Jan-Feb 2005): 16-24.
- [217] Stachowska-Pietka J, Waniewski J, Flessner MF, Lindholm B. Computer simulations of osmotic ultrafiltration and small-solute transport in peritoneal dialysis: a spatially distributed approach. Am J Physiol Renal Physiol 302 (May 15 2012): F1331-41.

APPENDIX



1. Equipments

- 1.1 Air Jacket CO₂ Incubator (NuAire: model NU-8700)
- 1.2 Analytical balance (Precia: model XB2200C)
- 1.3 Analytical balance (Ohaus: model AR2140)
- 1.4 Autoclave (Hiclave: model HVA-85)
- 1.5 Centrifuge (Beckman Coulter: model Allegra X-15R)
- 1.6 Flow cytometry (BD Biosciences: model FACS calibur)
- 1.7 Fluorescent /Phase contrast microscope (Olympus: model DP-72)
- 1.8 Freezer-20°C (Sanyo)
- 1.9 Freezer-80°C (Sanyo: model MDF-U5086W)
- 1.10 Hot air oven (Binder: model B28)
- 1.11 Hot plate stirrer (LabTech®: model LMS-100)
- 1.12 Inverted microscope (Nikon: model TS100)
- 1.13 Laminar flow (Thermo electron corporation: model SAFE 2010)
- 1.14 Micro fluid Spectrophotometer (Thermo Scientific: model NanoDrop 1000)
- 1.15 Microtome (Shadon Finesse)
- 1.16 Oven (Binder: model B28)
- 1.17 pH meter (Fisher scientific: model AB15)
- 1.18 Refrigerator 4°C (Sharp: model SJD56N)
- 1.19 Refrigerated Centrifuge (Boeco: model U32R)
- 1.20 Refrigerate microcentrifuge (Eppendorf: model 5415R)
- 1.21 Spectrophotometer (Thermo Fisher Scientific: model Multiskan EX)
- 1.22 Tissue embedding (LEICA: model EG1150H)
- 1.23 Tissue processor
- 1.24 Vaccuum pump
- 1.25 Vortex mixer (Labnet: model VX100)
- 1.26 Water bath (Mettler: model M22)

2. Materials

- 1.27 Adhesive cap 500 opaque (Carl Zeiss)
- 1.28 Adjustable micropipette: P2 (0.1-2 μ l), P10 (0.5-10 μ l), P20 (5-20 μ l), P100 (20-100 μ l), P1000 (100-1,000 μ l) (Gilson)
- 1.29 Beaker: 50 ml, 100 ml, 200 ml, 500ml, 1000 ml (Pyrex)
- 1.30 Coplin jar
- 1.31 Cylinder: 25 ml, 50 ml, 100 ml, 250 ml, 500 ml, 1,000 ml (Pyrex)
- 1.32 Filter paper No.2 (Whatman)
- 1.33 Flask: 250 ml, 500 ml, 1000ml (Pyrex)
- 1.34 Glass vacuum filtration unit (Gibco)
- 1.35 Iris scissors
- 1.36 Membrane slide 1.0 PEN (Carl Zeiss)
- 1.37 Microcentrifuge tube: 0.2 ml, 0.5 ml, 1.5 ml (Axygen)
- 1.38 Parafilm (American Nation Can)
- 1.39 Petri dish (Corning)
- 1.40 Pipette (Corning)
- 1.41 Pipeting aid (Gilson)
- 1.42 Pipette tip: 10 μ l, 20 μ l, 200 μ l, 1,000 μ l (Axygen)
- 1.43 Polypropylene conical tube: 15 ml and 50 ml (Corning)
- 1.44 Reagent bottle: 100 ml, 250 ml, 500 ml, 1000 ml (Pyrex)
- 1.45 Staining jar
- 1.46 Stirring-magnetic bar
- 1.47 Syringe: 5 ml, 10 ml, 20 ml (Thermo)
- 1.48 Syringe filter: 0.2 μ m (pore size) diameter 40 mm (Minisart)
- 1.49 Tissue culture flask: 25 cm² (NUNC)
- 1.50 Tissue forcep
- 1.51 Tissue cassette
- 1.52 Well plate: 6 well plate, 12 well plate (Corning)

3. Chemical

1.53 Cell culture

- 1) Fetal bovine serum (Gibco: cat.no.10270)
- 2) Insulin (Sigma-Aldrich: cat.no.11882)
- 3) Penicillin-streptomycin 10,000 U/ml (Gibco: cat.no. 15140-122)
- 4) RPMI medium 1640 (Gibco: cat.no. 31800-022)
- 5) HAM-F12 culture medium (Gibco Invitrogen, Grand Island, NY, USA)
- 6) Sodium Bicarbonate (Sigma-Aldrich: cat.no. S4772)
- 7) Trasferrin (Sigma-Aldrich: cat.no. T0665)
- 8) Trypsin (Sigma-Aldrich: cat.no. T7409)
- 9) Collagen I (Gibco: cat.no. IC2931A)
- 10) Water bath treatment (Andwino Scientific: cat.no. 190009)

1.54 Reagents and chemical for Flow Cytometry

- 1) Paraformaldehyde
- 2) Saponin (Sigma-Aldrich: cat.no. S7900)
- 3) Annexin V/PI kit
- 4) TUNNEL assay

1.55 Chemical for cell injury studies

- 1) LDH detection kit (CytoTox 96, Promega, and Madison, WI, USA)

1.56 Chemical for pathology examination

- 1) PARAPLAST* tissue embedding medium (Mccormick™ scientific)
- 2) Xylene
- 3) Ethanol 99.9% (Merck)
- 4) Deionized water (dH₂O)
- 5) Tris Buffered Saline (TBS)
- 6) Citrate

- 7) EDTA

1.57 General chemical

- 1) Hydrochloric acid solution (HCl)
- 2) Phosphate buffer saline (PBS)
- 3) Sodium hydroxide (NaOH)
- 4) Sterile water (ready for use)

4. Reagent preparation

a. Culture medium

Fetal bovine serum	10	%
Penicillin	50	µg/ml
Streptomycin	50	µg/ml
Insulin	0.1	µg/ml
Transferrin	5	µg/ml
Selenium	50	µg/ml
In HAM-F12		

b. Phosphate Buffer Saline (PBS)

Sodium chloride (NaCl)	0.137	M
Potassium (KCl)	2.7	mM
Potassium dihydrogen phosphate (KH ₂ PO ₄)	1.4	mM
disodium hydrogen phosphate (NaHPO ₄)	0.01	M

c. Trypsin-EDTA solution

Trypsin	0.125	% (w/v)
EDTA	0.53	mM
in PBS		

d. 0.5% Periodic Acid Solution

Periodic acid	0.5	g
In water	100	ml

e. Test for Schiff reagent

Pour 37% formalin 10 ml into a watch glass then drop the reagent, a good Schiff reagent will rapidly turn a red- Purple color

4. Periodic acid-Schiff (PAS) staining procedure

1. Deparaffinize and hydrate to water
2. Oxidize in 0.5% periodic acid solution for 5 minutes
3. Rinse in distilled water
4. Place in Schiff reagent for 15 minutes (Section turn light pink color)
5. Wash in lukewarm tap water for 5 minutes (Immediately sections turn dark pink color)
6. Counterstain in Mayer's hematoxylin for 1 minute
7. Dehydrate and coverslip using a synthetic mounting medium

Pathology examination scoring system

Histological tissue was examined. The absence of a numeral indicates that the finding specified was not identified. Significance of differences in a pair wise (Fisher's) test between Group 1 and each treatment group: * P<0.05, *** P<0.01, **** P<0.001

Version I	Version II
1. Liver	
No abnormality detected Solitary pale cell focus(i) Vacuolation Focal inflammation PAS STAIN: negative PAS STAIN: positive (grade +/-) PAS STAIN: positive (grade +) PAS STAIN: positive (grade ++) Total incidence for score expanded DIASTASE + PAS STAIN: negative DIASTASE + PAS STAIN: positive (kupffer cells, grade +/-) DIASTASE + PAS STAIN: positive (kupffer cells, grade +) DIASTASE + PAS STAIN: positive (kupffer cells, grade ++) Total incidence for score expanded finding	Congestion Vacuolar degeneration Necrosis Cellular infiltration Thrombosis and vasculitis hyperplasia Fibrosis Key to scores: - = No lesions observed; ± = Mild, Absent or focal lesions; + = Moderate, multifocal lesions; ++ = Moderately severe, diffuse lesions; +++ = Very severe, diffuse lesions
2. HEART :	

<p>No abnormality detected</p> <p>(Grade +/-)</p> <p>(Grade +)</p>	<p>Congestion / Haemorrhage/ Myofibril</p> <p>Vacuolar degeneration & necrosis</p> <p>Hyalinised vessels,</p> <p>Thrombosis and vasculitis</p> <p>Key to scores:</p> <p>- = No lesions observed;</p> <p>± = Mild, Absent or focal lesions;</p> <p>+ = Moderate, multifocal lesions;</p> <p>++ = Moderately severe, diffuse lesions;</p>
<p>3. KIDNEY :</p>	
<p>No abnormality detected</p> <p>Capsular inflammation</p> <p>Area(s) of inflammation</p> <p>Area(s) of haemorrhage(s)</p> <p>Basophilic tubules</p> <p>Unilateral pelvic dilatation</p> <p>Mineral deposit(s)</p>	<p>0 = Normal structure</p> <p>1 = No cellular proliferation or fibrosis in renal glomerulus</p> <p>= No capillary congestion or microthrombus</p> <p>= Swelling and blurry boundary of renal tubular epithelial cell, stenosis or atresia of lumens</p> <p>= Protein cast and renal interstitial edema</p> <p>2 = Glomerular capillary congestion</p> <p>= Scattered necrosis in renal tubular epithelial cell</p> <p>= Interstitial edema and inflammatory cell infiltration</p> <p>2 = 2 + lamellar necrosis of renal tubular epithelial cell</p>
<p>4. SPLEEN :</p>	

No abnormality detected	
Focal capsular inflammation	
Area(s) of inflammation and necrosis	0 = Normal structure
Increased haemosiderin	1 = Necrosis in the follicular center was seen;
PAS STAIN: positive (grade +/-)	
PAS STAIN: positive (grade +)	2 = Blood sinus expansion and arteriolosclerosis
PAS STAIN: positive (grade ++)	
Total incidence for score expanded finding	3 = Necrosis in the follicular center, blood sinus expansion and arteriolosclerosis
DIASTASE + PAS STAIN: positive (grade +/-)	
DIASTASE + PAS STAIN: positive (grade +)	
Total incidence for score expanded finding	

5. MESENTERIC LYMPH NODE:	
No abnormality detected	0 = Normal structure
Congestion	1 = Follicle Germinal center dilated,
Reactive	lymphatic sinus dilated, sinus cell
Partly replaced by area of inflammation with giant cells	hyperplasia or only lymphatic sinus dilated, sinus cell hyperplasia
Dilated blood vessels with thrombus formation	2 = Follicle Germinal center dilated,
PAS STAIN: positive (grade +/-)	lymphatic sinus dilated, sinus cell
PAS STAIN: positive (grade +)	hyperplasia, spotty necrosis in mantle zone
PAS STAIN: positive (grade ++)	and Germinal center or only lymphatic
Total incidence for score expanded finding	sinus dilated, and sinus cell hyperplasia,
PAS STAIN: not examined	infiltration of neutrophil, eosinophile
DIASTASE + PAS STAIN: positive (grade +/-)	granulocyte and plasmocyte
DIASTASE + PAS STAIN: positive (grade +)	3 = Follicle Germinal center dilated,
DIASTASE + PAS STAIN: positive (grade ++)	lymphatic sinus dilated, sinus cell
Total incidence for score expended finding	hyperplasia, spotty necrosis in mantle zone
DIASTASE + PAS STAIN: not examined	and Germinal center, infiltration of
	neutrophil, eosinophile granulocyte and
	plasmocyte

6. ILEUM :	
No abnormality detected	(1) Mucosa intact (epithelium mucosae, glandular epithelium), no necrosis
Submucosal pigment deposit(s)	(2) Mucosa incomplete, focal necrosis (3) Edema in lamina propria, submucous layer and placenta percreta (4) Inflammatory cell infiltration (neutrophilic granulocytes, eosinophile granulocytes, large mononuclear cells) in lamina propria, submucous layer, and placenta percreta.
	Scoring standards (1) + (3) = 0 score (2)or (4) = 1 score (2) + (3) = 2 scores (2) + (4) = 3 scores

Finding
<p>7. LUNGS:</p> <ul style="list-style-type: none"> No abnormality detected Mild inflammatory changes Increased alveolar macrophages Area(s) of haemorrhage(s) Area(s) of alveolar congestion Medial hypertrophy
<p>8. ADRENALS:</p> <ul style="list-style-type: none"> No abnormality detected Unilateral focal vacuolation Unilateral focal pigment deposit(s)
<p>9. THYMUS:</p> <ul style="list-style-type: none"> No abnormality detected
<p>10. TESTES:</p> <ul style="list-style-type: none"> No abnormality detected Unilateral tubular atrophy: (Grade +/-), (Grade +++) Total incidence for score expandede finding Inflammation with or without giant cells
<p>11. PROSTATE:</p> <ul style="list-style-type: none"> No abnormality detected
<p>12. OVARES:</p> <ul style="list-style-type: none"> No abnormality detected, Unilateral cyst(s)
<p>13. UTERUS:</p> <ul style="list-style-type: none"> No abnormality detected Dilatation in both horns: (Grade +/-), (Grade +++) Total incidence for score expanded finding Area(s) of inflammation with giant cells

14. BRAIN:

No abnormality detected, Cyst(s)

15. SKELETAL MUSCLE:

No abnormality detected

16. PANCREAS:

No abnormality detected

Area(s) of inflammation

17. SALIVARY GLAND:

No abnormality detected

18. SUBMANDIBULAR LYMPH NODE:

No abnormality detected

19. PITUITARY:

No abnormality detected

Cyst(s)

20. SKIN/SUBCUTIS:

No abnormality detected

Focal ulceration with inflammation / necrosis

21. MAMMARY GLANDS:

No abnormality detected

22. URINARY BLADDER:

No abnormality detected

23. EYES:

No abnormality detected

24. OPTIC NERVE:

No abnormality detected

25. TONGUE:

No abnormality detected

26. AORTA:

No abnormality detected

27. THYROIDS:

No abnormality detected

Lymphoid foci

28. PARATHYROIDS:

No abnormality detected

29. TRACHEA:

No abnormality detected

30. OESOPHAGUS:

No abnormality detected

31. STOMACH:

No abnormality detected

Dilated/cystic gland(s)

32. DUODENUM:

No abnormality detected

33. JEJUNUM:

No abnormality detected

34. CAECUM:

No abnormality detected

Submucosal oedema

Area(s) of haemorrhage(s)

35. DIALATED BLOOD VESSELS:

Cystic crypt

Increased haemosiderin deposition

inflammatory changes

36. COLON:

No abnormality detected

Area(s) of submucosal inflammation and haemorrhage

Increased lymphoid tissue

37. RECTUM:

No abnormality detected or Increased lymphoid tissue

38. SCIATIC NERVE:

No abnormality detected

39. STERNUM / RIB:

No abnormality detected

40. LYMPH NODE(S):

BRONCHIAL: congestion

BRONCHIAL: reactive

41. INJECTION / TREATMENT SITE(S):

Subcutaneous oedema

Area(s) of simple subcutaneous inflammation

Area(s) of subcutaneous inflammation with haemorrhage

Area(s) of inflammation with giant cells Area(s) of subcutaneous inflammation with giant cells and haemorrhage

42. ABDOMEN:

Area(s) of inflammation, necrosis and giant cells

43. MESENTERY:

No abnormality detected

Area(s) of haemorrhage(s), simple inflammation

Area(s) of inflammation with giant cells

Area(s) of inflammation with haemorrhage Lymphoid foci

44. FALLOPIAN TUBES:

No abnormality detected Unilateral inflammatory cell infiltrate

Area(s) of inflammation, necrosis and giant cells

No abnormality detected or Unilateral inflammatory cell infiltrate

45. DIAPHRAGM:

No abnormality detected or

Adhesion(s), Inflammatory changes with or without giant cells

BIOGRAPHY

Phonethipsavanh Nouanthong was born on 05 October 1975, in Vientiane municipality, Lao PDR. I received BSc in Medical Technology at Khone Kean University, Thailand (1998), MSc in Health Science at Chiang Mai University, Thailand (2005), and completed a summer course in Biostatistics in Public Health I & II and Epidemiology of HIV/AIDS, Johns Hopkins Bloomberg School of Public Health, the JHU, Maryland, United State. I obtained MBA in International Business (2008). In 1998, I worked as a Medical Technologist at Lao Red Cross, Blood Transfusion Center. In later year, I was assigned to be an Acting Head of Laboratory and Training Section and was nominated to be a Director Assistant for Quality Assurance of Blood Safety Program (2001-2003). During 1999-2003, I also taught Immunology and Blood Banking at Medical Laboratory School, Laos. I worked a Research Assistant during my Master course (2003-2005) at Research Institute of Health Science, Chiang Mai University. Then I joined the HIV-Netherland Australia Thailand Research Collaboration Center in 2006 to 2008.

Published original articles,

1. Sitcharungsi R, Ananworanich J, Vilaiyuk S, Apornpong T, Bunupuradah T, Pornvoranunt A, **Nouanthong P**, Phasomsap C, Khupulsup K, Pancharoen C, Puthanakit T, T. Shearer W, Benjaponpitak S, and on behalf of the HIV-NAT 108 Study Group. Serum Immunoglobulin Isotypes in healthy Thai Children aged 2-15 years Determined by Nephelometry. *Microbiology and Immunology*, 56: 117–122, 2012.
3. Srithanaviboonchai K, Rungruengthanakit K, **Nouanthong P**, Pata S, Sirisanthana T, Kasinrerak W. Novel Low-Cost Assay for the Monitoring of CD4 Counts in HIV-Infected Individuals. *Journal of Acquired Immune Deficiency Syndromes*, 47(2): 135-139, 2008.
3. **Nouanthong P**, Supansa P., Sirisanthana T, and Kasinrerak W. A simple Manual Rosetting Method for Absolute CD4+ Lymphocyte Counting in Resource-Limited Countries. *Clinical and Vaccine Immunology*, p. 598-601, 2006 (Impact factor: 2.5)

