

# Background

## Autosomal Dominant Polycystic Kidney Disease (ADPKD)

- Most common hereditary kidney disease
- 4<sup>th</sup> leading cause of kidney failure
- Due to mutations of *PKD1* or *PKD2* gene
- Uncontrolled growth of fluid-filled cysts causes irreversible kidney damage
- The only currently approved drug, Tolvaptan, is expensive and associated with significant side effects

# **Study Aims**

- Create a national clinical trial network
- Test 400 patients using genetic and kidney volume based risk assessment tools, while evaluating the use of:
- Next generation sequencing for genetic testing
- 3D-ultrasound (US) for kidney volume measurement

Pilot clinical trial on a promising repurposed drug (Salsalate) using the high risk patient cohort identified in Project 1.2

## Methods $\mathbf{N}$ lela dim

Informed Consent

1.2



Sample

# Questionnaires

MRI

## **PKD Study Centres**

- YUKON NORTHWEST LABRADOF BRITISH ALBERTA \*



# Transforming Clinical Care in Polycystic Kidney Disease 2.1

Research Staff: Saima Khowaja, Crystal Quist, Fatemeh Nasri, Ioan-Andrei Iliuta, Elsa Guiard, Xuewen Song, Istvan Mucsi, Korosh Khalili, York Pei

## Patient Partners: David Hillier, Robert Buzinski, Lucy Delgado



- Complete patient risk assessments from all study sites
- Analyze imaging to validate the use of 3D-US in ADPKD risk assessment
- Short-term pilot study to examine the pharmacokinetics, safety, and tolerability of Salsalate in patients
- patients

# Future Opportunities for Patient Engagement

- Quarterly teleconference calls
- Feedback on trial design and consent for 2.1
- Contributors to future manuscripts and presentations
- Knowledge sharing

Contact us: Saima Khowaja 416-634-7918

Saima.Khowaja@uhn.ca Crystal.Quist@uhn.ca

Website: http://www.cansolveckd.ca/research/theme-1/adpkd



# **Next Steps**

• Potential use of Salsalate to reduce urine output in Tolvaptan-treated

### **Crystal Quist**

416-340-4800 x 2264







