

ADVANCING KIDNEY HEALTH, DRIVING CHANGE



2024 IMPACT REPORT



kidney
FOUNDATION™

MESSAGE FROM THE PRESIDENT AND NATIONAL EXECUTIVE DIRECTOR

In 2024, The Kidney Foundation celebrated 60 years serving the kidney community in Canada. Much has changed since those early days, and as we reflected on how far we've come, we celebrated advances in treatment and transplantation that enabled people with kidney failure to live longer and better lives. We also recognized the evolution and expansion of our work to build services and supports for people with kidney disease, to engage in advocacy and to improve awareness.

Looking forward, we wanted more for people living with kidney disease.

We embarked on a new strategic planning exercise, using the theory of change model to help us strengthen the connection between our programs and activities and the change we envision for our community (see pages 12-13). Through this process, which involved input from hundreds of stakeholders, we developed a plan that will support those experiencing kidney disease today, embed improvements in the health system tomorrow, and reduce the number of people experiencing kidney failure in the future.

Through our core programs and services we have provided much needed support to thousands of people battling kidney disease.

Through our network of branches and chapters with deep roots in the community, we deliver financial and peer support and educational materials. We are committed to helping people navigate their lifelong kidney health journey every step along the way, no matter who they are or where they live. This extends to people at higher risk of kidney disease as well as those who live in remote and rural communities.

Through our advocacy and awareness efforts, we push federal, provincial, and municipal governments to increase supports and reduce the barriers for people living with kidney disease. We launched our National CKD Framework initiative on Parliament Hill in 2024, to push for official recognition of kidney disease as a chronic disease and for earlier diagnosis and detection to delay/prevent kidney failure.

Through our research initiatives, we are funding discoveries and innovation that can transform and reshape the future of kidney health. We work with key partners such as the Canadian Institutes of Health Research, Canadian Society of Nephrology, and Canadian Society of Transplantation to fund new discoveries in kidney and transplantation science, fulfil capacity building grants to train the next generation of kidney scientists, and invest in transformational clinical trials.

Never has the future for people with kidney disease been brighter, with access to new medications, increased awareness of kidney disease and earlier diagnosis and treatment.

Pictured on the cover: Kidney Foundation advocacy volunteer Vince Andrews, at left, engages in conversation with a group of Nova Scotians concerned about kidney health, including Sharon Davis-Murdoch of the *Health Association of African Canadians* (see page 5 for more information on our call for a National CKD Framework)

To accomplish all this, we rely on the dedication and commitment of thousands of people who donate their expertise, time, and money to support the work and mission of The Kidney Foundation. Recently, we had the opportunity to recognize some of our strongest supporters and volunteers with King Charles III Coronation Medals (see page 22).

All of your contributions and passion fuel the work we do. On behalf of The Kidney Foundation, we thank you from the bottom of our hearts for your continued support.



A handwritten signature in black ink that reads "Kurtis Krug".

KURTIS KRUG
PRESIDENT



A handwritten signature in black ink that reads "Elizabeth Myles".

ELIZABETH MYLES
NATIONAL EXECUTIVE DIRECTOR

OUR VISION

Excellent kidney health, optimal quality of life for those affected by kidney disease, and a cure.

OUR MISSION

The Kidney Foundation of Canada is the leading charity committed to eliminating the burden of kidney disease through:

- Funding and stimulating innovative research for better prevention, treatments and a cure;
- Providing education and support to prevent kidney disease in those at risk and empower those with kidney disease to optimize their health status;
- Advocating for improved access to high quality health care;
- Increasing public awareness and commitment to advancing kidney health and organ donation.

RENOWNED CHEF PARTNERS WITH THE KIDNEY COMMUNITY KITCHEN

RECEIVING A DIAGNOSIS of a chronic condition like kidney disease can turn your world upside down, especially when it comes to your diet. The recommended dietary adjustments, while crucial for health, can make meals seem dull and disheartening, particularly for those who find joy and creativity in their culinary adventures.

The Kidney Foundation's **Kidney Community Kitchen** has consistently sought to help the kidney community overcome these challenges by providing valuable resources, including tasty recipes and expert nutrition advice. In 2024, they partnered with beloved Canadian Chef Anna Olson to deliver new kidney-friendly recipes and chef-approved cooking tips to elevate your kidney diet.

Anna's personal connection to kidney disease through a family member has equipped her with an understanding of the challenges associated with maintaining a kidney-friendly diet without compromising flavour.

"It's been my pleasure to work with the responsive and positive team at The Kidney Foundation of Canada, especially as a chef and having had a family member suffer from kidney disease. Cooking for a renal diet can be empowering, giving the patient or caregiver a sense of control, and The Kidney Foundation goes above and beyond to support this culinary journey. I'm humbled and honoured to have participated in this process through recipe collaboration and more."

Chef Anna truly delivered! In December, she filmed a captivating video where she guided viewers through the creation of cranberry orange steamed puddings. The positive response on YouTube and Facebook was overwhelming, inspiring many to embrace the recipe during the festive season.



Canadian celebrity chef and baker Anna Olson.

KIDNEY COMMUNITY KITCHEN STATISTICS



557

recipes posted since launch; 20 in 2024



317

blog posts written since launch; 12 in 2024



780,000

page views



253,000

active users

As 2025 rolled in, Anna gifted us with another iconic creation: her legendary red bell pepper soup with basil chicken. This recipe was supported by a cooking demonstration at our **2025 Virtual Patient Forum**, allowing participants to learn not only the dish, but also valuable tips for kidney-friendly cooking. In January of this year, she contributed a blog post on seasoning without salt, addressing a common concern for those on a renal diet.

"We are truly grateful to Anna for her generosity in sharing her talent, her time, and her compassion for the kidney community," says Carrie Thibodeau, National Director of Programs and Public Policy. "Through this collaboration, Anna has helped us connect with new audiences, enabling more people to discover resources tailored to their kidney diagnoses and offering reassurance that there is a meal plan for them—one that is both simple and delicious."

Looking ahead, we are excited to share more innovative recipes and expert insights to help our community make kidney-friendly eating a joyful experience. Together, we will turn dietary challenges into opportunities for creativity and connection in the kitchen!



We are truly grateful to Anna for her generosity in sharing her talent, her time, and her compassion for the kidney community.

— Carrie Thibodeau, National Director of Programs and Public Policy

A CALL TO ACTION: CANADA NEEDS A NATIONAL FRAMEWORK FOR CHRONIC KIDNEY DISEASE

CHRONIC KIDNEY DISEASE (CKD) is a growing public health crisis that affects millions of Canadians, but Canada currently lacks a coordinated national approach to tackle this lifechanging disease — leaving patients, caregivers, and health care providers to navigate a patchwork of services.

That's why a national framework to address CKD is urgently needed.

The Kidney Foundation is developing this framework, and its impact could be transformative. With better, more accessible early detection programs and timely access to treatment options, more Canadians could avoid kidney failure altogether. Health systems could save billions of dollars in treatment costs. Most importantly, people with CKD and their families could live longer, healthier lives.

"A national CKD framework is our opportunity to replace crisis care with preventive care, to reduce suffering, and to build a system that works for everyone — patients, families, and providers alike," said Elizabeth Myles, National Executive Director of The Kidney Foundation.

In May and June 2025, The Kidney Foundation hosted roundtables in Alberta and Atlantic Canada to discuss opportunities to address CKD at the provincial level. Participants included key provincial policymakers, government officials, health care professionals, and people with lived experience. At these meetings, important themes emerged. Among them were the importance of increasing awareness of kidney disease, expanding screening programs, simplifying navigation of the health care system, and ensuring equitable access to diagnosis and care. Another important point of discussion was the need to expand



Dr. Epsita Shome, left, and Dr. Scott Klarenbach joined key government officials, health care providers, and Kidney Foundation volunteers and staff for an Alberta Policy Roundtable in May 2025.

the number of health care professionals who can screen people who are at risk and subsequently treat the early stages of kidney disease.

A national framework would ensure consistent, evidence-based screening guidelines, better coordination between primary and specialist care, and investment in data and research. It would also address systemic issues like affordability of medications, cultural competence in care, and social determinants of health that disproportionately affect vulnerable populations, including Indigenous communities.

"The financial case is clear," noted Carrie Thibodeau, National Director of Programs and Public Policy. "Every dollar spent on CKD prevention saves up to \$45 in treatment costs. But the human impact of early diagnosis and treatment is even greater — lives extended, suffering reduced, and families better supported."

“



This will be an extremely impactful initiative. I believe the focus on early diagnosis and treatment will significantly improve the lives of people living with kidney disease.

- Vince Andrews, transplant recipient and former dialysis patient

Everyone affected by kidney disease has a role to play in driving change. Sharing lived experience is one of the most powerful ways to inform and influence better policy. The Kidney Foundation is continuing to meet with government officials and health system leaders across the country to push for a national framework that reflects the real needs of patients, caregivers, and communities. By sharing your story, engaging with advocacy efforts, or simply helping to raise awareness, you can help ensure that no one in Canada is left behind when it comes to kidney health.

PROGRAMS HELP PEOPLE FEEL CONNECTED AND INFORMED

WHEN SUSAN WAS first diagnosed with kidney disease it was a complete shock. “I had suffered with high blood pressure for 20 years but when I moved to BC from Ontario seven years ago, my blood pressure went through the roof.”

Knowing something was not quite right, Susan made an appointment at a local medical clinic and after a series of tests, was told she had stage four kidney disease. “I could not believe it. I knew very little about the disease and that high blood pressure is a key risk factor.

“After the shock of my diagnosis, I felt alone. It was then I discovered The Kidney Foundation and reached out to the Branch to learn about the various programs and services, in addition to educational and volunteer opportunities.”

Susan joined one of the volunteer chapters where she found others living with kidney disease in her community. “It was hugely therapeutic to speak to others going through similar experiences. I also attended some great educational sessions.”

As time went by, Susan wanted to do more and knew that volunteering could be an invaluable way to not only give back but also share her experience with others, so she decided to become a peer mentor. The Kidney Foundation offers programs that provide peer support, guidance, and companionship to those grappling with the realities of kidney disease. Mentors are supported with a comprehensive training program that can also offer the chance to reflect and understand more about themselves.

“I was matched with three lovely individuals, each with their own story. While I found it very rewarding to share my journey, it was also

beneficial for me as I learned from the mentees. It’s a wonderful program.”

Today, Susan continues to work with her nephrologist and kidney care team to maintain her kidney function



Susan enjoys working in her garden.

An avid cook, Susan was also concerned with how kidney disease would impact what she could eat.

Research shows that movement and healthy lifestyle habits are important for kidney health, and in the early stages of kidney disease may even help slow the progression to delay or eliminate the need for dialysis or a transplant. “My nephrologist wants me to adopt healthier lifestyle habits by walking and exercising more, as this is so important,” said Susan.

The Kidney Foundation’s resources and websites, which offer an array of educational materials, online tools, virtual exercise and cooking classes, recipes, and healthy lifestyle tips have helped to put Susan at ease.

“I just want to normalize my life as much as possible and I am very grateful for The Kidney Foundation and how it supports me and so many others in the kidney community do just that,” Susan adds.

PROGRAM STATISTICS



4,383
Peer Support
participants

Virtual education:
1,007 registrations
2,072 on-demand
views



\$1 million provided
in short-term
financial assistance

75,518 handbooks
and brochures
distributed



9,665 accessed
our online risk
awareness quiz

HELPING OTHERS BY SHARING PERSONAL EXPERIENCES

WENDY IS A long-time volunteer with The Kidney Foundation, where she is a support group facilitator and speaker for an online seminar series. She had a successful kidney transplant in 2018 and has since given birth to two daughters. Life is hectic with a toddler and a young child. Still, she finds time to give back.

“I have always been someone who likes to help others,” she says. “Volunteering with The Kidney Foundation means a lot to me. The environment is enjoyable, as I am able to speak with others who understand my journey.”

Wendy remembers how hard it was when she was diagnosed with lupus and kidney disease back in 2009. She was 26 years old and wanted to move to New York City after finishing school. When doctors told her she had two serious health issues it hit hard - and derailed those plans.



“It halted my life,” she reflects. “Everybody’s life around me was moving forward and mine was just still.”

When Wendy was first diagnosed, she did not know anyone with lived experience whom she could turn to for reassurance or emotional support. It made her situation even more challenging – and lonely.

Then, in 2016, Wendy was in hospital on dialysis and saw a notice looking for volunteers for a Kidney Foundation support group. She joined the group, sharing her story with others and connecting with a larger kidney community.

Today, Wendy volunteers as a mentor for the *Reproductive Care* peer support group. She shares her experience with lupus, kidney disease, and pregnancy after a kidney transplant with others who take part in the sessions. Many participants are considering having a child or have already been pregnant. They open up about their struggles and their success stories.

She has also overcome her initial “public speaking butterflies” to be a speaker for The Kidney Foundation’s educational webinars. These forums are available on the Foundation’s website and touch on a range of topics.

“Being a volunteer means everything to me,” she says. “It feels good for your story to be out there so others can benefit from it. It is comforting to know you are helping and making a difference.”



Being a volunteer means everything to me. It feels good for your story to be out there so others can benefit from it.

— Wendy

PLACING EDI INTO PRACTICE: PLATFORMING THE NEXT GENERATION OF KIDNEY RESEARCHERS

ENHANCING EQUITY, DIVERSITY AND INCLUSION (EDI) in research drives innovation and scientific advancement. Whether it's generating new research questions, providing unique solutions, or enriching research perspectives, the value of EDI practices in research are made clear. Yet, there continues to be disparities in access to academic exposure and research training across many specialties, directly affecting scientific development.

The KRESCENT program recognizes this disparity, and that such inequities begin long before the post-doctoral or speciality training stages. To empower young researchers and build research excellence in kidney health early on, the KRESCENT program launched the KRESCENT Summer Studentship Award in January of 2024.

After consultations with researchers, clinicians, patient partners, and other key stakeholders for the launch of KRESCENT 2.0 (a 2022 initiative to expand and improve the program), a clear gap in KRESCENT's programming was uncovered regarding the support of Black and Indigenous scholars. Kidney disease is widely over-represented in Black and Indigenous communities, yet those communities are under-represented in research and care, making it crucial to empower upcoming researchers and clinicians in those communities. However, of the 102 trainees that have participated in KRESCENT, only 28% identified as a 'visible minority' – out of which only one trainee has identified as Black, and none identified as Indigenous.



The identification of a lack of representation from Black and Indigenous students in the KRESCENT program and taking direct action to address it through an intentional and thoughtful outreach into the community has been a very inspiring model of what having an equity lens looks like in practice.

— Lydia-Joi Marshall, Program Equity Advisor

Thus began the development of the KRESCENT Summer Studentship Award, to promote and nurture young Black and Indigenous scholars interested in kidney research during their undergraduate or medical school degrees. Not only does this provide students the opportunity to engage in kidney research, build their resumes, and realize their career goals, but it does so in a culturally safe and barrier-free way. KRESCENT facilitates this in many ways, (1) by removing the barrier of locating an appropriate supervisor, (2) by ensuring all supervisors and mentors complete cultural sensitivity training, and (3) by offering a competitive working wage so students can participate free of financial stress.



The KRESCENT Summer Studentship has been an invaluable opportunity for me, as it provided me with a safe environment to explore kidney research and gave me a unique chance to work alongside experts in the field, which has been crucial in shaping my academic and career aspirations.

– Halimat Ibrahim, KRESCENT Summer Student, University of Alberta





I am proud to have contributed to this initiative that works to increase representation of Indigenous and Black students in kidney research. This initiative will create valuable opportunities for students, offering research experience in a culturally safe environment and helping to build a more inclusive and diverse future.

— Jocelyn Jones, Can-SOLVE CKD Indigenous Initiatives Manager



The KRESCENT Summer Studentship was an amazing experience for me. Not just the phenomenal research exposure, but the amazing people within KRESCENT and the people I met through the program!

– Tolu Ehindero, KRESCENT Summer Student, University of Alberta

In its inaugural year, the KRESCENT Summer Studentship was awarded to 3 students across 2 institutions, matching each to a supervisor that fit their academic and career interests. Stipends were provided amounting to \$12,000 each, facilitating their work for a 12–16-week summer research internship. They were also invited to share their work at the Fall 2024 KRESCENT meeting. Integrating the Summer Students into the broader KRESCENT programming allows them to expand beyond their institution and benefit from decades of kidney health knowledge and mentorship.

The KRESCENT Summer Studentship Award provides a huge opportunity to trainees, empowering them to engage in research, gain hands on experience, and learn from the top kidney experts in Canada.

KRESCENT is committed to maintaining the Summer Studentship and is excited to extend the award's impact by partnering with donors, institutions, and other funding partners to make more awards available.

As the KRESCENT Summer Studentship program continues to grow, the impact will be undeniable. By investing in young, Black and Indigenous scholars, we are investing in the future of kidney health in Canada, driving research innovation, and leading scientific advancement.

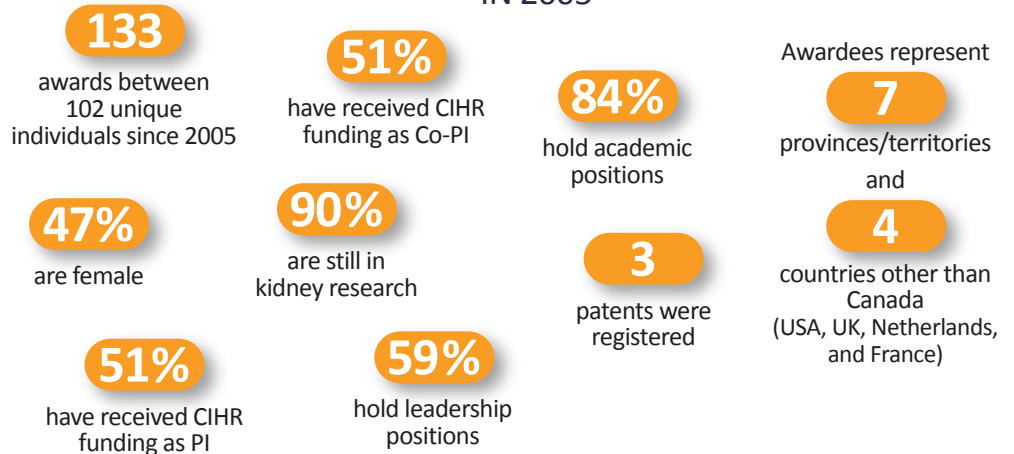


The KRESCENT interns were a unique set of trainees as they were proactively recruited to close a critical gap in the number of students of Black and Indigenous background interested in pursuing careers in academic medicine. It was so gratifying to see them making progress during the training period, and to see the zeal that has developed in them to be clinician-scientists of the future.

– Dr. Aminu Bello, KRESCENT Summer Studentship Supervisor and Professor of Medicine at the University of Alberta



PROGRAM IMPACT SINCE INCEPTION IN 2005



IMPROVING LIVING DONOR EVALUATION THROUGH THE ONE-DAY DONOR CLINIC

ESTABLISHED IN 2022 with the Canadian Society of Nephrology and Otsuka Canada, the **Vicky Karoutas Memorial Award** is granted to any applicant of The Kidney Foundation of Canada's Kidney Health Grant that demonstrates exceptional patient-centered research.

In 2023, the Vicky Karoutas Memorial Award winner was Dr. Seychelle Yohanna, a transplant nephrologist with St. Joseph's Healthcare Hamilton. Dr. Yohanna epitomizes the legacy of Vicky Karoutas through her passion for bettering the living donor evaluation process.

Living donation is the gold standard treatment for people living with kidney failure. For this reason, Dr. Yohanna, like many in her field, honor and celebrate the altruism of living donors. Yet, the current process of living donor evaluation can be burdensome and disenfranchising for many potential living donors which limits the number of living donations. "How are we going to increase the living donor rate if we don't focus on the experience?", Dr. Yohanna explains.

For potential recipients, it means faster access to a life-saving transplant. Dialysis is life-sustaining, but it can be hard on the body. Rather, the goal is to receive a kidney transplant prior to or as soon as possible after starting dialysis. Yet with the standard model of care, it can take months or even years to find a donor and go through the evaluation process. This time frame is reduced significantly with a one-day living donor assessment clinic, leading to better health outcomes and improved quality of life for kidney patients.

"I've always been super passionate about making it easier for living donors, because I look at them in awe... I just can't believe they're trying to give an organ to save someone's life. I respect them so much. They're not patients to me, they're heroes."

While the value of this model is prevalent, convincing evidence is needed to develop and implement such programs nation-wide. This is exactly what Dr. Yohanna and

her team aim to do with support from The Kidney Foundation of Canada and the Vicky Karoutas Memorial Award, by measuring the impact of the one-day assessment clinic on both donors and recipients and comparing it to the standard model of assessment.

With the additional funds from the award, Dr. Yohanna hopes to also develop a toolkit or blueprint to help other centres execute an expedited assessment model. Regardless of the unique differences between healthcare centres, "the idea is that you want to create an efficient, patient-centred process", she explains.

Dr. Yohanna has already helped to implement such programs in 2 other centres in Ontario, but she hopes she will be able to guide the implementation of fast and efficient living donor assessment clinics across the country.

This work exemplifies the legacy of Vicky Karoutas by focusing on patient and donor experience to improve the lives of kidney patients.

“

They're not patients to me, they're heroes.

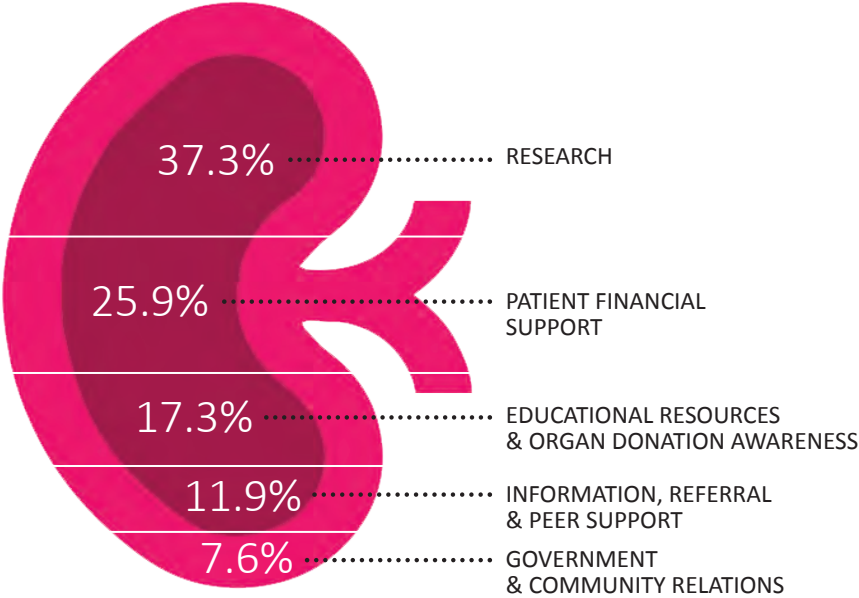


This is what led Dr. Yohanna and her team at St. Joseph's to develop a one-day donor assessment clinic in 2019. This clinic streamlines the current living organ donor evaluation process from 9-12 months into a single day, providing donors and recipients the answers they need much faster.

For potential living donors, this reduces many of the barriers that may disincentivize someone from donating, including time spent travelling, time off from work or away from family, numerous incurred expenses, and more.

SPENDING BY PROGRAM

THANKS TO the generous support of donors and partners, The Kidney Foundation of Canada’s program investments ensure improved kidney health and greater supports and services for all people impacted by kidney disease.



RESEARCH INVESTMENTS: \$3.7M FOR RESEARCH & INNOVATION

2024 HIGHLIGHTS

2024 KIDNEY WALKS*



101

IN-PERSON AND VIRTUAL WALKS

* INCLUDES KIDNEY MARCH

4,643

PARTICIPANTS

26,745

DONATIONS

\$3.3M

RAISED

ONLINE ENGAGEMENT



73,126

EMAIL NEWSLETTER SUBSCRIBERS

1.06

MILLION VISITORS TO OUR WEBSITES

85,463

SOCIAL MEDIA FOLLOWERS

VOLUNTEER SUPPORT



50,908

VOLUNTEER HOURS

+ 2,224

VOLUNTEER HOURS FOR RESEARCH-RELATED INITIATIVES

The Kidney Foundation is so grateful for the hours of dedication from our many volunteers who are engaged in everything from office support and events to programs and education to engagement with research. Clinicians, researchers, allied health professionals, partners, and people with lived experience contribute valuable hours out of their busy schedules to help us succeed.

A BOLD NEW PATH FORWARD: OUR PLAN TO CHANGE THE COURSE OF KIDNEY DISEASE

Over the past eight months, The Kidney Foundation of Canada has undertaken a strategic clarity initiative to sharpen our focus and deepen our impact. With the support of a grant from the MakeWay Foundation, we set out to answer a critical question: *How can we have the greatest impact on the lives of those affected by kidney disease?*

The result is our new **Theory of Change**: a focused, actionable roadmap that articulates what we aim to achieve and how we will get there.

A theory of change is more than a strategic plan. It's a commitment rooted in our strengths and in the realities faced by the people we serve. It begins with a clear understanding of the challenges we are uniquely positioned to address: late-stage diagnosis, inequitable access to treatment, the emotional and financial burden of kidney disease, and the urgent need for innovation in research and care. From there, a dedicated team of board members and staff from across the country began mapping a new course.

This strategy was built through deep reflection and widespread consultation. More than 200 voices were heard through focus groups which included people with lived experience, healthcare providers, researchers, partners, volunteers and donors. Another 740 community members shared their insights through our national survey on chronic kidney disease. Their perspectives helped shape and sharpen the plan we are proud to unveil today.

We listened. We questioned. We revised – again and again. And we emerged with clarity of purpose.

Over the next five years, we will:

- **FOCUS OUR SUPPORT WHERE IT'S NEEDED MOST:** providing knowledge, tools, financial assistance, and building connections to reduce isolation and help people manage their kidney health with confidence and dignity.
- **PUSH FOR SYSTEM LEVEL CHANGE:** advocating for earlier diagnosis, access to medications that delay progression, reimbursement of travel costs, and improved access to transplant.
- **INVEST IN LIFE-CHANGING RESEARCH:** funding innovations that lead to earlier detection, better treatments, and breakthroughs in transplant that can reshape the future of kidney health.

This theory of change will guide our work, inform our decisions, and hold us accountable to those we serve. We are currently working to define the impact measures that will help us measure and report progress towards our goals. We invite you to walk with us as we turn this vision into reality – because every Canadian living with or at risk of kidney disease deserves to be seen and supported, no matter who they are, where they live, or where they are on their journey.

Changing the Course of Kidney Disease By 2030



The Kidney Foundation of Canada **stands firm** for every Canadian living with or at risk of kidney disease – no matter who they are, where they live, or where they are on their kidney journey.



IMPROVE LIVES TODAY

- + Give Canadians the knowledge and tools to **take control** of their kidney health
- + **Connect people** to a supportive community, so no one faces kidney disease alone
- + Offer emergency **financial support** to help people get the care they need

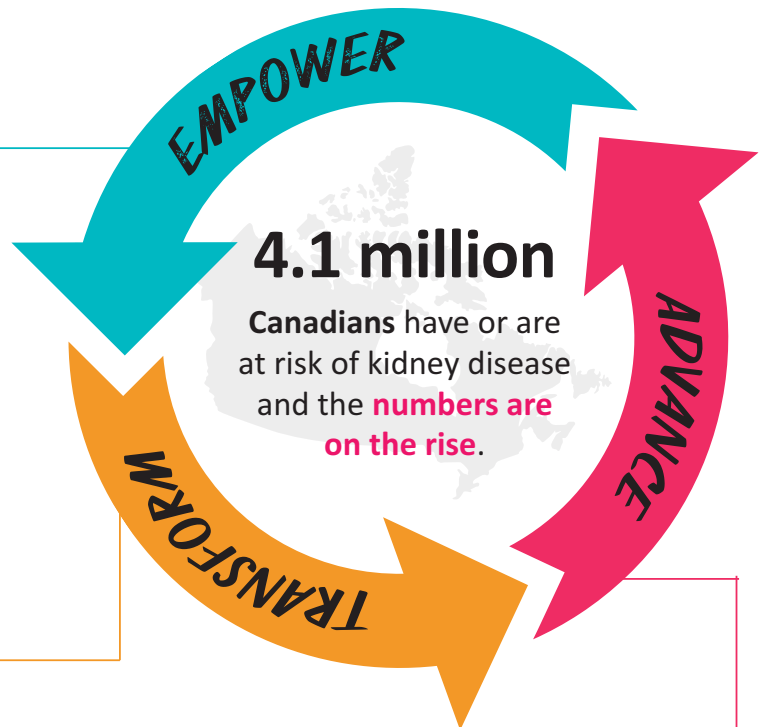


BREAK DOWN BARRIERS TO EQUITABLE CARE

- + Push for **routine screening** and fair access to **breakthrough medications**
- + Expand access to **coordinated care**
- + Fight for **reimbursement** of transportation and relocation costs
- + Improve **transplant access** by simplifying living donation and championing pre-emptive transplants



- Awareness**
- Support**
- Leadership**
- Education**
- Advocacy**
- Partnership**
- Research and Data**



INVEST IN RESEARCH TO END KIDNEY DISEASE FOR GOOD

- + Drive research that leads to **earlier diagnosis** and **better prevention** strategies
- + Prioritize innovative clinical interventions that **slow progression** and **improve quality of life**
- + Accelerate **transplant innovations** to extend and improve lives



PARTNERING TO MAKE RESEARCH INVESTMENTS GO FURTHER THAN EVER BEFORE

SINCE IT BEGAN in 1964, The Kidney Foundation's research program has invested \$141.6 million for kidney-related disease research in Canada.

While much of the research we support is completed through our research competitions, another arm of our program represents an important aspect which demonstrates the Foundation's commitment to addressing the need for innovation and advancement in kidney research and care: partnership.

Strategic partnership allows the Foundation to contribute to the funding and development of larger, high-impact projects and networks which may fall outside the scope of our standard funding opportunities. They also provide the unique opportunity to shine the light on kidney disease, positioning it in a place of priority among other national health challenges. These partnership opportunities help to leverage generous donor support and increase the reach of donated funds exponentially, creating a larger impact for those living with kidney disease.

In 2024, our research program leveraged over \$12.5 million of support to kidney disease research through partnerships with organizations like the Canadian Institute for Health Research and Breakthrough T1D, formerly the Juvenile Diabetes Research Foundation (JDRF).

We have also committed to new partnerships with organizations like the Canadian Donation and Transplantation Research Program (CDTRP) to specifically support large-scale, ambitious, and patient-focused research efforts across the country.

By maximizing donor support, building community and collaboration, and supporting innovative ideas, these partnerships lead to crucial benefits for those living with kidney disease. Strategic partnership opportunities continue to represent an important priority for Foundation investment as we work to foster kidney research excellence across Canada.

We truly can accomplish more together.

THANKS TO THE GENEROUS SUPPORT OF DONORS IN 2024:



\$3.7M
INVESTMENT
FOR RESEARCH
& INNOVATION



\$12.5M
LEVERAGED
FROM **5** FUNDING
PARTNERS



102
TOTAL RESEARCH GRANTS
• 32 New grants awarded
• 59 Kidney Health Research Grants
• 11 Allied Health Awards
+ • 26 KRESCENT Awards

96
PRINCIPAL
APPLICANTS

25
RESEARCH
INSTITUTIONS
NATION-WIDE

499
TOTAL
RESEARCHERS

RESEARCH THEMES

- Acute Kidney Injury
- Cancer
- Chronic Kidney Disease
- Diabetes
- Dialysis
- Genetics
- Glomerulonephritis
- Health Policy
- Hypertension
- Kidney Biology
- Kidney Development
- Nursing
- Organ Donation
- Patient Care
- Population Health
- Predictive Biomarkers
- Quality of Life
- Renal Failure
- Screening and prevention
- Transplantation
- Underserved Communities
- Urology
- Water / Salt and Calcium Handling by the Kidney

MORTEZA AHMADI: CATCHING UP WITH KRESCENT

FROM ASTROPHYSICS TO kidney health, Dr. Morteza Ahmadi shares his journey from a physics student to KRESCENT Fellow to the founder of a start-up biotechnology company that aims to transform dialysis care.

Dr. Ahmadi's academic career began in physics; however, he found it was not the right fit. Instead, he chose to go into healthcare, focusing on the application of nanotechnologies in biomedical engineering.

Aiming to reduce equipment requirements, Dr. Ahmadi started working with the aforementioned silicon nano-filters as they have small, microscopic filter channels. The size of these channels allowed for the filtering out of tiny molecules and wastes from blood while leaving larger, more important components.

Although Dr. Ahmadi had the technical capability to work with these tiny filters, he did not have a background in biology or medicine. This stifled the potential of his project and led him to the KRESCENT program.

The KRESCENT program was incredibly impactful for Dr. Ahmadi. Along with knowledge and expertise, he also made connections to colleagues, mentors, clinicians, and other interdisciplinary experts in kidney health. The networking capacity of KRESCENT is what he described as "the missing piece" in his research.

Most notably, KRESCENT gave Dr. Ahmadi an opportunity to connect with patients. While providing newfound motivation to his work, he also realized the value of keeping patients at the center of his work. He notes that continuous patient interaction is imperative when developing health

He quickly became passionate about solving the issues of traditional dialysis by using silicon nano-filters to for kidney filtration.

Dialysis is a common treatment for people with kidney disease. It works by relieving damaged kidneys of their role in filtering blood. Although a life-saving treatment, dialysis comes with its own set of issues. One major issue is the requirement of large, bulky machinery, making it difficult for kidney patients to live their lives freely.



The network that has been created based on the KRESCENT program and later on The Kidney Foundation of Canada has been helping us out in various aspects of our project over a number of years and continues to do so.

— Dr. Morteza Ahmadi

devices, and that patient input allowed him to develop his work even further.

Since completing KRESCENT, Dr. Ahmadi created a biotechnology startup called Qidni Labs. The company focuses on developing technologies to better address and treat kidney failure. The goal of the company is to transform the quality of life for patients on dialysis by improving access and reducing the cost of dialysis.

To accomplish this, the company is developing a portable and nearly waterless hemodialysis system. The small size and portability of this device removes the intensive equipment barrier that keeps

dialysis machines and people bound to their homes or hospitals. Moreover, the nature of its design can also help bring dialysis treatment to patients in rural areas and developing nations.

Merging his expertise in physics and engineering with the support and knowledge provided by KRESCENT and The Kidney Foundation of Canada, Dr. Ahmadi has become a leader in innovative dialysis technology.

Dr. Ahmadi's journey demonstrates the value of investing in researchers and ideas outside of the status quo of kidney health research.

USING LIQUID BIOPSY TO DETECT KIDNEY CANCER RELAPSE

Renal cell carcinoma (RCC) is the most common type of kidney cancer, accounting for about 80% of cases. Often, treatment requires the surgical removal of the affected kidney to remove the cancer. Despite this, almost a third of patients experience a recurrence, or relapse, of cancer in their lifetime.

Predicting a relapse of cancer can be challenging. Therefore, it is important to monitor patients so that if the cancer returns it can be treated as soon as possible.



Monitoring patients for the recurrence of cancer often involves looking at the physical characteristics of the tumor or tumor cells by imaging or tissue sample. However, these features may be difficult to visualize if a new tumor is very small, in turn making it difficult to detect a recurrence and delaying treatment.

To address this, Dr. Yasser Riazalhosseini and his team at McGill University are hoping to develop a

liquid biopsy test that will use genetic information of RCC tumors to detect new tumors before they grow and spread.

A liquid biopsy refers to the collection of blood or urine to investigate features of a tumor. Opposed to standard imaging and solid tissue biopsies, it provides a safer and less invasive alternative to detect or monitor cancer in a patient.

Using patient blood samples, Dr. Riazalhosseini explains, “the idea is to track genetic materials that are released from tumors into the blood stream to be able to detect tumors even when they are much smaller than current clinical tools can detect.”

Since tumor cells have a unique genetic makeup compared to healthy cells, the genetic material released by tumors can act as biomarkers, or indicators for the presence of cancer. These biomarkers, despite being in small quantities, can then be measured with precision using genetic sequencing technologies.

Although this work is still in its infancy, support from The Kidney Foundation of Canada allows Dr. Riazalhosseini and his team to establish the feasibility of this test. This includes determining which bio-markers are the most predictive and how well the test works compared to standard procedures. If successful, its implementation can revolutionize follow up care for RCC patients.

He explains, “that earlier and personalized interventions can help prevent relapse or delay it much longer so that it's more under control... and help reduce the burden of disease relapse or metastasis in patients who are affected by kidney cancer”

ADDRESSING THE MENTAL HEALTH NEEDS OF PARENTS OF PEDIATRIC KIDNEY TRANSPLANT RECIPIENTS

Caring for a child with a kidney transplant is complex and difficult, with parents often feeling worried, anxious, distressed, and isolated. Such challenges impact parents' ability to care for themselves and their child. Improved support for parents of transplant recipients can benefit be widely beneficial to the well-being parents, which ensures children are provided with the care and support they need before, during, and after transplant.

Connecting with others going through similar experiences can help to bridge this gap in parental support. However, the families of pediatric kidney transplant recipients represent a small and geographically diverse population, making it hard to find a sense of community. To make it easier, Dr. Samantha Anthony and her team at The Hospital for Sick Children in Toronto are trialling a peer mentoring program for parents, called *iParent2Parent*.

The *iParent2Parent* program is “an innovative, virtual peer mentorship intervention designed to meaningfully engage and support parents of pediatric kidney transplant recipients,” explains Dr. Anthony. The goal of the program is to connect parents one-on-one with other parents trained to offer mentorship and support.

The *iParent2Parent* program is a new adaption of the evidence-based *iPeer2Peer* program, an online support program designed to help teenagers with chronic disease better manage their



lives. *iParent2Parent*'s changes are based on parent-identified priorities to better reflect their context, needs, and life experiences.

As a new intervention, Dr. Anthony's study aims to measure the effectiveness, practicality, and sustainability of the *iParent2Parent* program. This will be done by collecting questionnaire responses and

interviews with mentor and mentee participants. The results of this study will provide “an imperative first step in guiding *iParent2Parent*'s real-world implementation,” says Dr. Anthony, by providing data on the impact of the program as well as areas for improvement.

There is exceptional value in prioritizing familial support for pediatric transplant families. Dr. Anthony also highlights that improving the mental health of parents has the potential to directly affect the health of the child as well, leading to “improved care, emotional stability, and treatment adherence, which are critical for long-term health outcomes.” Evaluating innovative programs such as *iParent2Parent* emphasizes the importance of parent health and well-being.

DEVELOPING A MODEL FOR PERSON-CENTERED INTEGRATED CARE FOR PEOPLE WITH KIDNEY DISEASE

Kidney disease is complex, often requiring lifestyle and diet changes as well as managing with other associated conditions, like diabetes or hypertension. Yet, most early-stage kidney disease patients do not have access to coordinated care to help them manage the complexities of their disease before they reach kidney failure.

Dr. Maoliosa Donald and her team at the University of Calgary aim to address these gaps in early kidney care by building a model for person-centered integrated care to provide patients and caregivers the support they need while also guiding healthcare providers (HCPs) to address all patient needs.



Integrated care refers to a model of healthcare that takes a coordinated and holistic approach to patient care. These strategies counter referral-based formats, where patient needs are often fragmented among different HCPs, leaving patients to fill in the gaps in care. Instead, integrated care provides a framework in which higher levels of communication and organization among HCPs, service coordinators, and patients or caregivers can be achieved.

This means “aligning services and resources to provide patients and caregivers support, but also looking at the health care providers and supporting them to manage this complex patient population,” explains Dr. Donald.

While integrated care strategies are used for other chronic conditions including late-stage kidney disease care, there are no models for early-stage kidney disease. Yet, coordinated and comprehensive care earlier in the kidney journey leads to slower progression of the disease and improved quality of life.

Still in the early stages of this work, Dr. Donald and her team are working to understand the gaps in care early-stage kidney patients face and to identify the best models to address them. Further, they are launching a nation-wide survey in 2025 to gather patient, caregiver, HCP, and decision-maker perspectives on the models they identify.

Prioritizing the engagement of these groups allows the research team to create a model of care fits both the broad needs of patients and the healthcare system it must work within. Dr. Donald explains, “patients and healthcare providers need to co-create this model of care rather than us coming in and saying what we think will work”.

Overall, Dr. Donald and her team hope to develop an integrated model of care that enhances the management of early-stage kidney disease, increases access different HCPs, and leads to improved quality of life for kidney patients.

PERSONALIZING IMMUNOTHERAPY FOR KIDNEY TRANSPLANT RECIPIENTS

Immunosuppressant medications have seen huge improvements over the past four decades and more, reducing the risk of organ rejection. While these improvements have been vital to ensure the health of a transplanted organ, it has also led to a growing concern around over-immunosuppression and toxic adverse effects on patients. This over-immunosuppression leaves patients vulnerable to infection and/or cancer and has become the leading cause of mortality in kidney transplant patients.

There is now a need to balance immunosuppression with the risk of rejection or infection to ensure patient safety overall. However, over-immunosuppression is hard to predict and currently no clinical tools exist to help guide immunosuppression.

To this end, Dr. Sacha De Serres and his team at Laval University have begun a research project that aims to use human leukocyte antigen (HLA) information to predict the immune response of kidney transplant recipients.

HLAs are “the immune ID card of our own system”, explains Dr. De Serres. They are molecules that play a crucial role to help your immune system identify what is itself and what is a foreign pathogen and then trigger an immune response accordingly.

HLA molecules are also highly variability from person-to-person, with new evidence suggesting that they can predict a patient’s immune response in certain cases. As such, Dr. De Serres and his team are exploring how different combinations and levels of HLA molecules may be linked to immune-related adverse events in transplant recipients.

Anticipating a predictive relationship, they hope this information will allow them to create a risk assessment tool that will assign a risk score to transplant recipients based on HLA blood tests.



Like blood pressure monitoring, such a tool would classify patients into low, intermediate, or high-risk groups, facilitating more informed decision-making from patients and clinicians regarding the course of immunosuppression moving forward.

“The analogy with the hypertension field is that we’re not going to say, you should reduce this medication or that

medication, but overall, it seems your blood pressure is too high, or that it is too low, so your doctor should adjust treatment accordingly,” Dr. De Serres explains, equating blood pressure to immune system capacity.

While there is still a lot of work to be done before their tool can be developed, the team is off to a great start, aiming to analyze data from over 200 patients over the next 2 years. If their data shows predictive value, they hope to start clinical trials soon after.

2024 NEW FUNDED RESEARCHERS BY PROGRAM



KIDNEY HEALTH RESEARCH GRANTS



ANDREW ADVANI

CO-APPLICANT:
Darren Yuen
St. Michael's Hospital, ON
2024 - 2026: \$120,000
PROJECT TITLE:
Repurposing istradefylline for kidney fibrosis
CATEGORY:
● Chronic kidney disease
● Kidney biology
● Renal failure



WILLIAM BEAUBIEN-SOULIGNY

CO-APPLICANTS:
Annie-Claire Nadeau-Fredette,
Dr. Frederic Baroz, Neila Mezghani, Rita Suri,
Ron Wald, Thomas Mavrakanas
Centre Hospitalier de l'Université de
Montréal, QC
2024 - 2027: \$179,250
PROJECT TITLE:
Subphenotypes of hemodynamic parameters
and symptoms in prevalent in-center HD
patients
CATEGORY:
● Dialysis
In partnership with Can-SOLVE



R. TODD ALEXANDER

CO-APPLICANT:
Governors of the University
of Alberta, AB
2024 - 2026: \$120,000
PROJECT TITLE:
Exploiting genetic models of the
proximal tubule tight junction to
dissect the role of hyperphosphatemia
in cardiovascular disease
CATEGORY:
● Chronic kidney disease



KEVIN BURNS

SURESH GADDE
CO-APPLICANT:
Dylan Burger
Ottawa Hospital Research Institute, ON
2024 - 2026: \$95,000
PROJECT TITLE:
Bioengineered nanoparticles to prevent
acute kidney injury
CATEGORY:
● Acute kidney injury
● Kidney biology
● Renal failure



MOUMITA BARUA

SARAH GAGLIANO
CO-APPLICANT:
Andrew D. Paterson
University Health Network, ON
2024 - 2026: \$120,000
PROJECT TITLE:
Does genetic analysis of
combined kidney measures in
the population prioritize and
identify novel signals?
CATEGORY:
● Genetics
● Kidney biology
● Predictive biomarkers



ALEXANDRA CAMBIER

CO-APPLICANT:
Centre Hospitalier Universitaire
Sainte-Justine, QC
2024 - 2027: \$180,000
PROJECT TITLE:
Towards precision care:
Unraveling molecular mechanisms of
Childhood IgAN through sCD89 Insights
CATEGORY:
● Glomerulonephritis
● Kidney biology
● Predictive biomarkers



MARK CANNEY

CO-APPLICANTS:

Ayub Akbari, Brendan McCormick, Caitlin Hesketh, David Massicotte-Azarniouch, Grace Fox, Sean Barbour, Stuart Nicholls, Todd Fairhead
Ottawa Hospital Research Institute, ON
2024 - 2026: \$119,128

PROJECT TITLE:

Self Management to Achieve Reduction in proteinuria in IgA Nephropathy (SMART-IgAN)

CATEGORY:

- Glomerulonephritis
- Hypertension
- Patient care



GREGORY HUNDEMER

CO-APPLICANTS:

Alexander Leung, Arya Rahgozar, David Colantonio, François Madore, Gregory Kline, Manish Sood, Mohsen Agharazii, Remi Goupil, Tim Ramsay
Ottawa Hospital Research Institute, ON
2024 - 2027: \$119,911

PROJECT TITLE:

Subclinical Primary Aldosteronism: A novel target to improve outcomes in chronic kidney disease

CATEGORY:

- Chronic kidney disease
- Hypertension



RAHUL CHANCLANI

CO-APPLICANTS:

Aisha Lofters, Catherine Birken, Charles Keown-Stoneman, Emily Haseler, Gita Wahi, Janis Dionne, Jonathan Maguire, Katherine Morrison, Kozeta Miliku, Laura Anderson, Manish Sinha, Padmaja Subbarao, Russell Jude de Souza, Shrikant Bangdiwala, Sonia Savitri Anand, Stuart Turvey, Sujane Kandasamy, Tammy McLoughlin Brady, Tiffany Bradshaw
McMaster University, ON
2024 - 2026: \$120,000

PROJECT TITLE:

Derivation and external validation of a risk prediction model for targeted screening for high blood pressure in children

CATEGORY:

- Hypertension
- Population health
- Screening & prevention of renal disease



NINA JONES

CO-APPLICANT:

University of Guelph, ON
2024 - 2026: \$120,000

PROJECT TITLE:

Signalling mechanisms of Nck adaptor proteins in podocytes

CATEGORY:

- Kidney biology



THOMAS KITZLER

CO-APPLICANT:

The Research Institute of the McGill University Health Centre, QC
2024 - 2026: \$180,000

PROJECT TITLE:

A comprehensive approach to study novel monogenic causes of CAKUT in humans

CATEGORY:

- Chronic kidney disease
- Genetics
- Kidney development



SACHA DE SERRES

CO-APPLICANT:

Mohsen Agharazii
Université Laval, QC
2024 - 2026: \$117,502

PROJECT TITLE:

Taking advantage of the high interindividual heterogeneity in the expression of HLA molecules on human kidney endothelial cells to personalize immunotherapy

CATEGORY:

- Patient care
- Predictive biomarkers
- Transplantation



JOAN KREPINSKY

CO-APPLICANT:

McMaster University, ON
2024 - 2026: \$120,000

PROJECT TITLE:

Understanding the role of inhibin beta C in diabetic kidney disease

CATEGORY:

- Chronic kidney disease
- Diabetes



RICHARD HÉBERT

CO-APPLICANT:

University of Ottawa, ON
2024 - 2026: \$120,000

PROJECT TITLE:

SGLT2 inhibition: impact on mitochondrial mice PT

CATEGORY:

- Diabetes



YORK PEI

CO-APPLICANT:

James Scholey
University Health Network, ON
2024 - 2026: \$119,914

PROJECT TITLE:

Drug repurposing for treatment of Alport Syndrome

CATEGORY:

- Genetics
- Glomerulonephritis



DANIELA ROTIN

CO-APPLICANT:

Mathieu Lemaire
The Hospital for Sick Children, ON
2024 - 2026: \$119,786

PROJECT TITLE:

The ubiquitin ligase NEDD4L as a novel determinant of blood pressure

CATEGORY:

- Hypertension, water/salt and calcium handling by the kidney



SHAIFALI SANDAL

CO-APPLICANTS:

Ann Bugeja, Ekaterina (Katya) Loban, Heather Badenoch, Marie-Chantal Fortin, Ngan Lam, Peter Nugus, Rahul Mainra, Rosemary Morgan
The Research Institute of the McGill University Health Centre, QC
2024 - 2026: \$120,000

PROJECT TITLE:

Identifying the causes of gender inequities in living kidney donations

CATEGORY:

- Organ donation
- Patient care
- Transplantation



MANISH SOOD

CO-APPLICANTS:

Ann Bugeja, Ayub Akbari, Gamal Wafy, Gregory Hundemer, Junayd Hussain, Maneesh Sud, Navdeep Tangri, Peter Tanuseputro, Pietro Ravani, Stephen Fung
Ottawa Hospital Research Institute, ON
2024 - 2026: \$119,9990

PROJECT TITLE:

Re(de)fining CKD to reduce kidney disease in young adults

CATEGORY:

- Chronic kidney disease
- Population health



TOMOKO TAKANO

CIRIACO A. PICCIRILLO**CO-APPLICANT:**

The Research Institute of the McGill University Health Centre, QC
2024 - 2026: \$120,000

PROJECT TITLE:

Role of the extrafollicular B cell response in the production of anti-podocyte antibodies in idiopathic nephrotic syndrome

CATEGORY:

- Glomerulonephritis

ALLIED HEALTH KIDNEY RESEARCH GRANTS



MAOLIOSA DONALD

CO-APPLICANTS:

Amity Quinn, Brenda Hemmelgarn, Kim Manalili, Meghan J. Elliott
University of Calgary, AB
2024 - 2026: \$120,000

PROJECT TITLE:

Enhancing person-centered care for people with chronic kidney disease

CATEGORY:

- Patient care
- Quality of life



CATHERINE FORTIER

CO-APPLICANTS:

Mohsen Agharazii, Paul Poirier
Laval University, QC
2024 - 2026: \$120,000

PROJECT TITLE:

Sustainable exercise habits and vascular health in hemodialysis patients

CATEGORY:

- Hypertension
- Patient care
- Quality of life

ALLIED HEALTH KIDNEY SCHOLARSHIP



MAI MOHSEN

SUPERVISOR:

David Cherney
University Health Network, ON
2024 - 2025: \$5,000

PROJECT TITLE:

The use of new glucose lowering therapies to reduce cardiorenal risk in kidney transplant recipients (KTR)

CATEGORY:

- Diabetic kidney disease

ALLIED HEALTH KIDNEY DOCTORAL FELLOWSHIP



JULIA ST LOUIS

SUPERVISOR:

Kimberley Widger
University of Toronto, ON
2024 - 2026: \$62,000

PROJECT TITLE:

Advancing infant organ donation in Canada: A multi-methods study

CATEGORY:

- Organ donation

KRESCENT NEW INVESTIGATOR AWARD



SERGI CLOTET-FREIXAS

McMaster University, ON
2024 - 2027: \$195,000
Infrastructure: \$25,000
PROJECT TITLE:
Sex-based study of renal metabolism
to uncover novel targets in DKD
and AKI
CATEGORY:
● Kidney biology



AYODELE ODUTAYO

Sunnybrook Hospital, ON
2024-2027: Partnership with CIHR
REDI program
PROJECT TITLE:
Expanding the use of kidney and
heart protective treatments to
improve cardiorenal disease
CATEGORY:
● Chronic kidney disease



ANN YOUNG

St. Michael's Hospital, ON
2024 - 2027: \$210,000
Infrastructure: \$25,000
PROJECT TITLE:
Kidney Care Outreach:
Strengthening care delivery for
patients at high risk
CATEGORY:
● Chronic kidney disease

KRESCENT POST-DOCTORAL FELLOWSHIP

KRESCENT IS A NATURAL
PARTNERSHIP OF THE KIDNEY
FOUNDATION AND THE CANADIAN
SOCIETY OF NEPHROLOGY



ADRIANNA DOUVRIS

SUPERVISOR:
William Stanford
Ottawa Hospital Research Institute, ON
2024 - 2027: \$184,166
PROJECT TITLE:
Mechanism of tuberous sclerosis complex
(TSC) kidney disease pathogenesis
CATEGORY:
● Genetics



WALEED RAHMANI

SUPERVISORS:
Benjamin Humphreys, Kory Lavine
Washington University in St. Louis, MO
2024 - 2027: \$65,000
PROJECT TITLE:
The macrophage niche and its role in
repair after ischemic AKI
CATEGORY:
● Acute kidney injury



CAL ROBINSON

SUPERVISORS:
Rulan Parekh, Anna Heath
The Hospital for Sick Children, ON
2024 - 2027: \$195,000
PROJECT TITLE:
Improving nephrotic syndrome treatment
using novel clinical trial methods
CATEGORY:
● Glomerulonephritis

KRESCENT SUMMER STUDENT



TOLU EHINDERO

SUPERVISOR:
Aminu Bello
University of Alberta, AB
2024 - 2024: \$12,000



HALIMAT IBRAHIM

SUPERVISOR:
Aminu Bello
University of Alberta, AB
2024 - 2024: \$12,000



CHLOE WILLIAMS

SUPERVISOR:
Michael Zappitelli
The Hospital for
Sick Children, ON
2024 - 2024: \$12,000

THE CANADIAN DONATION AND TRANSPLANTATION RESEARCH PROGRAM (CDTRP) PARTNERSHIP INNOVATION GRANTS



WILLIAM BEAUBIEN-SOULIGNY

Centre Hospitalier de l'Université de Montréal
2024-2025: \$30,000
PROJECT TITLE:
Second-generation tissue oximetry using Near-
infrared spectroscopy for post-operative kidney
transplant monitoring in adult recipients
CATEGORY:
● Organ Donation
● Transplantation

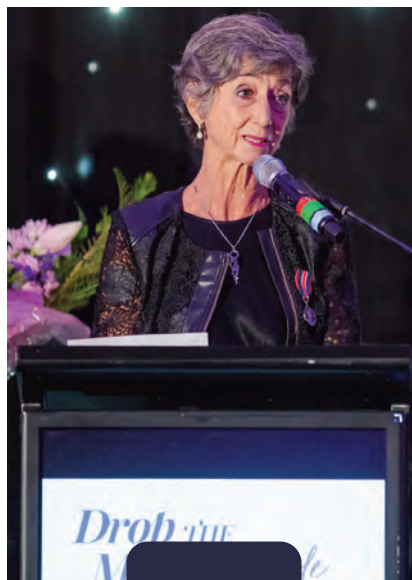


DIANA MAGER

University of Alberta
2024-2025: \$30,000
PROJECT TITLE:
Food Insecurity in Canadian households
with children and youth who have
undergone organ transplantation
CATEGORY:
● Organ Donation
● Transplantation

KING CHARLES III CORONATION MEDAL CELEBRATES FOUNDATION-NOMINATED CHAMPIONS

In 2024, The Kidney Foundation of Canada proudly nominated 45 exceptional volunteers, innovators, and leaders in kidney research, health care, organ donation, and transplantation for the prestigious **King Charles III Coronation Medal**. In 2025, medal ceremonies took place across Canada, during which recipients were honoured for their unwavering dedication to improving the detection, prevention, and treatment of kidney disease. They inspire hope and drive progress in the fight against kidney disease not only in Canada, but around the world.



Dr. Adeera Levin



Left to right: Kyle Egeto, Kurtis Krug (National President)



Left to right: Kurtis Krug (National President), Dr. Joanne Kappel, Senator Tracy Muggli



Left to right: Kurtis Krug (National President), Dr. Sandra Davidson, Dr. Marcello Tonelli, Dr. Julian Midgley, Joyce Van Deurzen (Executive Director, Saskatchewan & Southern Alberta Branches)

LIST OF RECIPIENTS

Dr. Todd Alexander (AB)
 Dr. Stephen Beed (NS)
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 Dr. Clara Bohm (MB)
 Bernadine Boulet (AB)
 Toby Boulet (AB)
 Dr. Kevin Burns (ON)
 Sylvie Charbonneau (QC)
 Dr. William Clark (ON)
 Dr. Marie-Josée Clermont (QC)
 Sandra Davidson, Ph. D. (AB)
 Jacques Davignon (QC)
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 Dr. Michelle Hladunewich (ON)
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 Dr. Adeera Levin (BC)
 Matthew MacFarlane (PEI)
 Kara Schick-Makaroff Ph. D. (AB)
 Dr. Braden Manns (AB)
 June Martin (ON)
 Shirley McLaren (MB)
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 Dr. Michael A.J. Moser (SK)
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 Dr. Rita Suri (QC)
 Caroline Tait, Ph. D. (AB)
 Dr. Navdeep Tangri (MB)
 Terry Tomkins (AB)
 Dr. Marcello Tonelli (AB)
 Dr. Lori West (AB)

2024 MEDAL FOR RESEARCH EXCELLENCE RECIPIENT

DR. JOHN CHAN

For over 30 years, Dr. John Chan has explored how diabetes, hypertension, and kidney function interact at the molecular level. Informing the development of targeted treatments motivates this quest; along the way, and through his extensive activities as a teacher, mentor, leader, researcher, and research committee member, he has helped foster international understanding of the pathology and systemic factors of kidney disease.

Achievements like these are the reason why The Kidney Foundation of Canada recognized Dr. Chan, Chief of the Laboratory of Molecular Endocrinology and Nephrology at the Research Centre of the Centre Hospitalier de l'Université de Montréal and a Professor of Medicine at the university, as the 2024 Medalist for Research Excellence.

Personal and professional experiences both played a role in Dr. Chan's decision to put his extensive training in molecular endocrinology to use in nephrology. Kidney disease was a factor in the sudden and early death of his sister-in-law. The tragic event brought recognition of the seriousness of the disease.

Several years later, Dr. Chan was invited to take over a lab at Maisonneuve-Rosemont Hospital Research Centre in Montreal to pursue independent research, mixing his expertise in endocrinology with nephrology.

A career high point came during 2000-2010 when Dr. Chan and his team defined the physiological role of the kidney renin-angiotensin system and the relationship between oxidative stress and diabetic kidney disease. "I think we proved the point that the kidney renin-angiotensin system is crucial for the normal physiology of the kidney," he says. "If you over-activate the system, you cause kidney injury and the progression of diabetes."

Beyond outstanding research, he has also demonstrated excellence by giving back to the community. Dr. Chan has supervised over 20 PhD students during his career and has endlessly advocated for the importance of basic science in nephrology, nationally and internationally.

For these reasons and more, the Medal for Research Excellence was awarded to Dr. Chan in acknowledgement of his distinguished career and continued leadership in Canadian nephrology.

“

Dr. Chan has been a career scientist, committing himself to understanding the molecular underpinnings of kidney disease. As a fundamental scientist, his work has been key in creating building blocks of knowledge that have changed our state of understanding of the disease as a whole and reminds us that fundamental science is a requirement to move the needle forward at all stages of kidney research.

— Leanne Stalker, National Director of Research,
The Kidney Foundation of Canada



2024-2025

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Branch Office Contact Information

BRITISH COLUMBIA AND YUKON BRANCH
200 - 4940 Canada Way
Burnaby, BC V5G 4K6
604-736-9775 / 1-800-567-8112
info.bcy@kidney.ca
Pia Schindler, Executive Director

NORTHERN ALBERTA AND THE TERRITORIES BRANCH
11227 Jasper Ave., Suite 202
Edmonton, AB T5K 0L5
(780) 451-6900 / 1-800-461-9063
within Alberta & Territories
info.nabt@kidney.ca
Flavia de la Fuente, Executive Director

SOUTHERN ALBERTA BRANCH
6007 1A Street SW
Calgary, AB T2H 0G5
403-255-6108 / 1-800-268-1177
info.sab@kidney.ca
Joyce Van Deurzen, Executive Director

SASKATCHEWAN BRANCH
A3-116 103 Street East
Saskatoon, SK S7N 1Y7
(306) 664-8588
1-833-664-8588 (within SK)
info.sk@kidney.ca
Joyce Van Deurzen, Executive Director

MANITOBA BRANCH
209-2211 McPhillips Street
Winnipeg, MB R2V 3M5
204-989-0800 / 204-989-0815
info.mb@kidney.ca
Greg Unger, Executive Director

ONTARIO BRANCH
201-1599 Hurontario Street
Mississauga, ON L5G 4S1
1-905-278-3003 / 1-800-387-4474
ontario@kidney.ca
Anthony Tirone, Executive Director

QUEBEC BRANCH
880-5160 Decarie Blvd.
Montreal, QC H3X 2H9
514-938-4515 / 1-800-565-4515
infoquebec@kidney.ca
Elsa Desjardins, Executive Director

ATLANTIC BRANCH OFFICE
PO Box 13381
St John's, NL A1B 4B7
709-753-8999 / 1-800-563-0626
infoatlantic@kidney.ca
Rosanna Mitchell, Executive Director



The Kidney Foundation of Canada is a proud member of the Health Charities Coalition of Canada (HCCC). Founded in 2000, HCCC is a member-based organization comprised of national health charities and patient groups who represent the voice of patients at all levels of the health continuum. Our mandate is leading national collective action on health policy and health research to benefit patients living in Canada.



The Kidney Foundation of Canada is a proud member of HealthPartners, a collective fundraising with workplaces nationwide for 20 of Canada's most trusted health charities. These charities, including our own, are at the forefront of direct support, advocacy and research in the fight against the medical conditions that will likely affect 9 in 10 of us in our lifetimes. Virtually everyone has a connection to one of the charities. So, HealthPartners makes it easy for virtually anyone to join them in transforming lives while building a healthier Canada.



NATIONAL OFFICE
880-5160 Decarie Blvd.
Montreal, QC H3X 2H9
514-369-4806 / 1-800-361-7494
info@kidney.ca
Elizabeth Myles, Executive Director
www.kidney.ca

Charitable Registration Number:
10756 7398 RR0001

The Kidney Foundation of Canada's audited financial statements are available online at www.kidney.ca/about-us. In the overview section you will find the Annual Reports and Financial Statements.