# **Resource Summary Report**

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# CKID A Prospective Cohort Study of Kidney Disease in Children

RRID:SCR\_001500

Type: Tool

## **Proper Citation**

CKID A Prospective Cohort Study of Kidney Disease in Children (RRID:SCR\_001500)

#### **Resource Information**

URL: http://www.statepi.jhsph.edu/ckid/

**Proper Citation:** CKID A Prospective Cohort Study of Kidney Disease in Children (RRID:SCR 001500)

**Description:** Prospective, observational cohort study of children with mild to moderate chronic kidney disease (CKD) to: (1) determine risk factors for progression of pediatric chronic kidney disease (CKD); (2) examine the impact of CKD on neurocognitive development; (3) examine the impact of CKD on risk factors for cardiovascular disease, and; (4) examine the impact of CKD on growth. The CKiD study population will include a cohort of 540 children, age 1 16 years, expected to be enrolled over a 24-month period.

Abbreviations: CKID

**Synonyms:** CKID: A Prospective Cohort Study of Kidney Disease in Children, Chronic Kidney Disease in Children

**Resource Type:** portal, bibliography, data or information resource, research forum portal, disease-related portal, topical portal, resource

**Keywords:** child, young human, pediatric, risk factor, kidney function, neurodevelopment, cognitive ability, behavior, kidney, urologic problem, glomerular disease, adverse effect, cognition, growth, adolescent, infant, clinical

Related Condition: Chronic kidney disease, Renal disease, Cardiovascular disease

Funding: NIDDK U01DK066174;

NCRR M01RR000052

Resource Name: CKID A Prospective Cohort Study of Kidney Disease in Children

Resource ID: SCR\_001500

Alternate IDs: nlx\_152790

**Record Creation Time:** 20220129T080207+0000

**Record Last Update:** 20250509T055514+0000

#### Ratings and Alerts

No rating or validation information has been found for CKID A Prospective Cohort Study of Kidney Disease in Children .

No alerts have been found for CKID A Prospective Cohort Study of Kidney Disease in Children .

#### Data and Source Information

Source: SciCrunch Registry

### **Usage and Citation Metrics**

We found 10 mentions in open access literature.

**Listed below are recent publications.** The full list is available at <u>dkNET</u>.

Jiang K, et al. (2023) Associations of Biomarkers of Kidney Tubule Health, Injury, and Inflammation with Left Ventricular Hypertrophy in Children with CKD. Kidney360, 4(8), 1039.

Abraham AG, et al. (2021) Variability in CKD Biomarker Studies: Soluble Urokinase Plasminogen Activator Receptor (suPAR) and Kidney Disease Progression in the Chronic Kidney Disease in Children (CKiD) Study. Kidney medicine, 3(5), 712.

Pierce CB, et al. (2021) Age- and sex-dependent clinical equations to estimate glomerular filtration rates in children and young adults with chronic kidney disease. Kidney international, 99(4), 948.

Yokoyama JS, et al. (2020) Association Between Chronic Kidney Disease-Mineral Bone Disease (CKD-MBD) and Cognition in Children: Chronic Kidney Disease in Children (CKiD) Study. Kidney medicine, 2(4), 398.

Atkinson MA, et al. (2019) Genetic associations of hemoglobin in children with chronic kidney disease in the PediGFR Consortium. Pediatric research, 85(3), 324.

Brooks ER, et al. (2019) Metabolomic Patterns in Adolescents With Mild to Moderate CKD. Kidney international reports, 4(5), 720.

Lalan S, et al. (2018) Cardiometabolic Risk Factors, Metabolic Syndrome, and Chronic Kidney Disease Progression in Children. The Journal of pediatrics, 202, 163.

Ng DK, et al. (2018) Combination of pediatric and adult formulas yield valid glomerular filtration rate estimates in young adults with a history of pediatric chronic kidney disease. Kidney international, 94(1), 170.

Hartung EA, et al. (2016) Growth in Children with Autosomal Recessive Polycystic Kidney Disease in the CKiD Cohort Study. Frontiers in pediatrics, 4, 82.

Schwartz GJ, et al. (2012) Improved equations estimating GFR in children with chronic kidney disease using an immunonephelometric determination of cystatin C. Kidney international, 82(4), 445.