

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

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

Availability: Free, Freely available

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: 20260912T195526+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 [kravitz2](#) .

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.