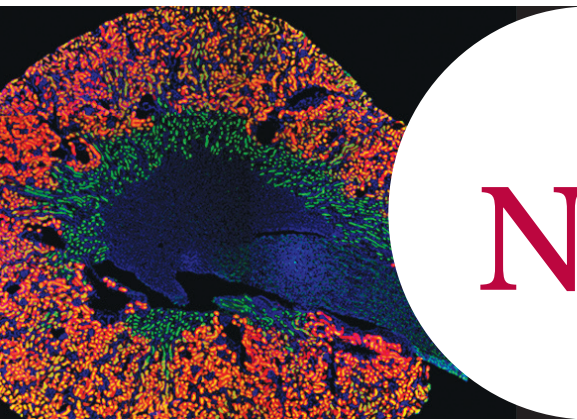




NEPHROLOGY UPDATE

National Recognition for NIH and Pharmaceutical Clinical Trial Expertise

In the past year, the Division of Nephrology at WashU Medicine has seen a remarkable expansion in the number of clinical trials that have been successfully managed by the expertise of faculty and the work of clinical research coordinators performing a wide range of investigations.

Within the past three years, the Division has seen the number of NIH and pharmaceutical clinical trials increase by 60-70%. The largest number of clinical trials focus on transplant-related issues or glomerular diseases.

"We've been told our work is outstanding, which is why we have NIH and industry partners coming to us to participate in various clinical trials," said Tarek Alhamad, MD, Medical Director of Transplant Nephrology. "It's a reflection of the hard work by our entire team and our dedication to patient education and care throughout a clinical trial process."

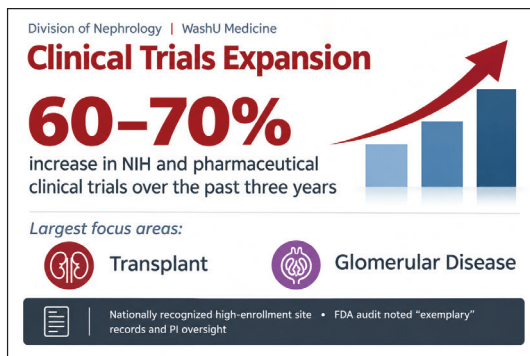
WashU Nephrology Associate Clinical Chief Tingting Li, MD, MSCI, Director of the Glomerular Center of Excellence at WashU, agrees, noting the glomerular disease space is seeing a rapid increase in the number of trials available to patients. "We have initiated or participated in glomerular disease clinical trials for 15-20 years," said Dr. Li. "Because of a deeper understanding of disease mechanisms and more streamlined regulatory pathways, there has been a surge in clinical trials for glomerular diseases, leading to a growing number of FDA-approved therapies and a rapidly evolving treatment landscape."

WashU Nephrology also is nationally recognized for its ability to rank as a high

enrollment center for clinical trials. The Food and Drug Administration routinely audits active clinical trial sites that have high performance and enrollment to ensure patient safety guidelines and informed consent protocols are followed and to verify proper storage of investigational drugs and collection of data. A routine audit earlier this year for a study investigating the safety of RSV vaccines in transplant patients noted "exemplary" records, organization, and expertise as well as "consistent demonstrations of Principal Investigator oversight." That study is a critical Phase 2b clinical trial evaluating the effectiveness of 1- or 2-doses of RSV vaccine who have received a kidney (or lung) transplant. It is significant because in patients taking immunosuppressive drugs, RSV can lead to severe pneumonia or death. The trial will eventually lead to more specific and safer clinical guidelines on the use of vaccines in immunosuppressed, solid organ transplant patients.

"WashU expertise is invaluable to industry sponsors bringing new therapies to market," said Nancy Sweitzer, MD, PhD, WashU's Vice Chair of Medicine for Clinical Research. "The benefits of growing clinical trials at WashU are many—career advancement for our faculty, cutting-edge training for our learners, financial diversification of our research portfolio and, most important of all, offering the latest in promising new treatments to our patients."

Within WashU Nephrology, Dr. Alhamad says the advantages for having clinical trials overseen here are better than average outcomes and the high volume

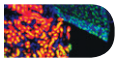


of kidney transplants (350+) performed annually. His team follows almost 4,000 patients.

Along with research, The Glomerular Center at WashU continues to expand its impact in patient care and education. Dr. Li recently chaired the 4th Annual Glomerular Diseases Symposium, which provided updates on new therapeutics across a broad range of glomerular diseases as well as the latest developments in clinical trials.

The Division is adding more faculty to support research and clinical care in transplant nephrology and glomerular diseases. Dr. Li will add one new faculty member in the Center for Glomerular Diseases by next summer. Dr. Alhamad has three physicians serving as research coordinators in transplant nephrology with Dr. Nahom Sisay recently joining Drs. Gwen Amurao and Spencer Amurao. He also is adding two more research visitors before the end of the year and has specialists in data management to round out the team of nephrologists and fellows involved in clinical research.

"When we start a study, we enroll patients efficiently, have rigorous processes and a highly qualified research team, and we provide excellent care to all our patients," said Dr. Alhamad. "We get results—and that's why our numbers are climbing."



Message from the Chief



It is a credit to the expertise of our faculty as well as the hard work and dedication of research coordinators and staff that WashU Nephrology has seen a significant growth

in the number of clinical trials we offer to patients. Advantages to growing our portfolio are many, with the most significant being early access for our patients to the latest treatment options being evaluated. The growth spans both NIH-sponsored and industry-sponsored research, for which we have seen a remarkable 82% increase in revenue. Such funds can be rolled back into innovative scientific investigations and clinical trials and support the addition of staff and faculty who oversee these trials. The result is that we are continuing our long-standing leadership position in initiating, evaluating and offering some of

the most exciting clinical trials available today and our patient volume continues to expand.

Managing patients is truly all about the doctor-patient relationship. Such interactions are vital, not only to monitor chronic diseases over the long term, but also to ensure that direct patient care is personal, compassionate and effective. Toward that end, WashU Medicine and BJH Health's Center for Health AI (CHAI) has been rolling out an AI transcription tool, Abridge, that can listen, transcribe and then summarize patient conversations for electronic medical records. The tool, implemented in outpatient clinics, allows physicians to focus intently on conversations and treatment decisions and worry less about taking notes. Physicians still must review the final summaries to ensure accuracy, but the tool captures discussions of detailed symptom descriptions and next steps discussed in the clinic.

We have all seen or read about the growing concerns about the use of artificial intelligence. When used judiciously, however, it can improve healthcare without replacing the critical connection between patients and physicians. I have used Abridge in my clinic and have noticed the positive changes in time, accuracy and patient communication. I can also spend more time speaking to my patients instead of typing into the computer. I don't think AI is going away; but with tools such as Abridge, it can help us better focus on what matters: the care of our patients.

Ben

Benjamin D. Humphreys, MD, PhD
Joseph P. Friedman Professor and Chief
Division of Nephrology
WashU Medicine

Thank You!

We thank the following individuals who have donated generously to support our research and teaching missions as well as our programs and services:

Foundation for Barnes-Jewish Hospital

Children's Hospital Foundation-St. Louis

Dr. Thomas Ralph Pohlman (MD '76, Res/Fel '81)
and Dr. Elsie Winstead

Mrs. Jane Simmons and
Mr. Edward C. Simmons, III

Mrs. Kim Koenig and Mr. Joseph G. Koenig
KidneyCure

Support WashU Nephrology

If you would like to support our research and teaching mission or contribute to our programs and services, please contact

Rachel A. Hartmann, Medical Advancement
at WashU Medicine Nephrology,
by phone: 314-935-9715 or
email: rachel_hartmann@wustl.edu.

You may also support the Division through
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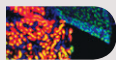
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Fellowship Notes



Taha Mohamed Djirdeh, MD, Nephrology Fellowship Program Associate Director

As the fall season begins, our newest fellowship class has already successfully completed their first three months of training. Our program's overarching goal is to consistently provide robust support and a seamless transition for incoming fellows, recognizing the dual challenges of relocating to a new city while simultaneously beginning rigorous subspecialty training. To achieve this smooth integration, we once again implemented our dedicated orientation block at the start of the academic year. This foundational period was specifically designed to help our new trainees hit the ground running with absolute clinical confidence. By prioritizing early exposure to our

hospital systems, core clinical protocols, and essential team dynamics, the orientation ensured our fellows felt fully prepared to take on their new responsibilities from day one.

Clinically, the cardiac service team has fully settled into the newly constructed Plaza West building over the past several months. Within this modern, state-of-the-art space, our fellows are actively navigating the intricate complexities of advanced multidisciplinary patient care. The physical layout and advanced resources of Plaza West have fostered an environment of highly efficient collaboration. Here, our trainees work closely, side-by-side with leading specialists across cardiology, cardiothoracic surgery, and vascular surgery. This fully integrated approach allows fellows to participate in shared decision-making and comprehensive disease management, providing them with invaluable experience in treating

highly complex cardiac and vascular cases within a centralized, highly specialized setting.

As we reach the end of the beginning of the academic year, we eagerly look forward to the multitude of presentations, professional conferences, and scholarly pursuits in which our trainees continue to actively engage. Academic excellence remains a core pillar of our curriculum. This October, that ongoing dedication culminates in Denver for the highly anticipated ASN Kidney Week. We are incredibly proud that our fellows will have the chance to present their accepted abstracts on this prominent stage. Sharing these complex, highly interesting cases with the global nephrology world is a true testament to their clinical curiosity and hard work. We look forward to watching them represent our program and ultimately bring valuable new medical insights back to our institution.

Welcome Our New WashU Nephrology Fellows

Annesha Ria Banerjee, MD
*Residency: Stony Brook Hospital
Stony Brook, NY*

Dina Talha Elsayed, MBBS
*Residency: Newark Beth
Israel Medical Center
Nocturnist Hospitalist,
St. Louis Mercy Hospital South*

Irvianny Rosario Madera, MD
*Residency: SBH Health System
Bronx, New York*

Dean J. Mellas, MD
*Residency: Southern
Illinois University
Springfield, IL*

Divya Sharma, MBBS
*Residency: University of
Oklahoma Health Sciences Center
Oklahoma City, OK*

Daniel Zamanian, MD
*Residency: William
Knighton Health
Shreveport, LA*

Departing Fellows

Congratulations to our recent graduates who move to the next phase of their careers:

Maheen Khan, MBBS
*Assistant Professor of Medicine
WashU Nephrology*

Yazan Kharabsheh, MD
*Advanced Transplant
Nephrology Fellowship
WashU Nephrology*

William Martin, MBChB
*Consultant Nephrologist
Vincient's University
Hospital and National
Maternity Hospital
Dublin, Republic of Ireland*

Ramayee Nadarajan, MBBS
*Assistant Professor of Medicine
Case Western Reserve University
School of Medicine,
Staff Nephrologist, Cleveland VA*

Nicole Shammass, MD
*Nephrologist
Indiana Nephrology and
Internal Medicine PC*

AbdulMoid Shehzad, MBBS,
*Nephrologist
Gulf Coast Nephrology
Houston, TX*

Departing Transplant Nephrology Fellows:

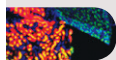
Zainulabdeen Alsaedi,
MBChB
*Clinical Assistant Professor
and Transplant Nephrologist
Temple University
Philadelphia, PA*

Hamza Yousef Ikrai, MD
*Assistant Professor of Medicine
University of South Alabama*

Mahmoud M. Musa, MD
*Assistant Professor and
Transplant Nephrologist
University of Tennessee
Memphis, TN*

Out on the town in STL –
fellows sharing great
food and great company.





Alumni Connections

Brent W. Miller, MD

*Michael A. Kraus Professor of Medicine in Nephrology and Clinical Chief of Nephrology
Indiana University School of Medicine
WashU Nephrology Fellow: 1994-1998
WashU Nephrology Faculty: 1998-2018*

Brent Miller, MD, says his life's mission was, in part, forged visiting family farms in rural Indiana as a young boy before he went to WashU medical school, residency and then his nephrology fellowship.

"My paternal grandfather, who was a farmer, was one of the early patients in Indiana on peritoneal dialysis (PD)," said Miller. "PD allowed some modicum of a lifestyle and certainly extended his life, but a forced change to center-based hemodialysis had a major negative impact on his and my grandmother's lifestyle because the nearest center was 50 miles away. My other grandfather, a farmer in Southern Indiana, died of uremia because there was simply no dialysis available there at the time."

Dr. Miller, now the Michael A. Kraus Professor of Medicine in Nephrology and Clinical Chief of Nephrology at Indiana University School of Medicine, is a nationally recognized expert on home dialysis options. For seven of his 20 years while on faculty at WashU Medicine, he served as Medical Director of Home Modalities. He also helped train more than 100 WashU nephrology fellows on the intricacies and challenges of home-based dialysis options.

While at WashU, Dr. Miller had thought about creating a one-year fellowship focused on home dialysis. He got the chance after being recruited to IU, where he and colleague Nupur Gupta, MBBS, now co-lead one of only three such subspecialty fellowships in the country. "I was fortunate enough to have some seed money from a patient to get this off the ground," says Dr. Miller. "We want to develop future leaders and innovators in home dialysis."

The fellowship, which started in 2023, is a critical pipeline to increase the number of nephrologists interested in being part of, and leading, home dialysis programs. The number of new patients requiring dialysis in the United States has started to decrease with newer chronic kidney disease therapies and more kidney transplants, but there remains a large need for lifelong maintenance dialysis in over 500,000 patients annually. Couple that with a growing shortage of nephrologists, and the need is becoming acute in both urban and rural areas. "We have many counties in Indiana without a single nephrologist," Dr. Miller stressed. "We need to do a better job of inspiring others to enter the field."

He is passionate about recruiting and mentoring junior faculty. "People often overlook that Indiana University has the largest medical school in the country," he said. "We also are in that large swath of the country—as is Missouri—that has a very high incidence of chronic kidney disease, and we follow more than 1,000 nephrology patients requiring dialysis right now. In other U.S. programs, you may never see certain cases, but in the Midwest, everything can and does walk in the door. And patients are so appreciative of your efforts."

Names he recalls with fondness from his time at WashU include those in the transplant nephrology and dialysis programs, including Drs. Daniel Brennan, Anitha Vijayan, and Daniel Coyne, alongside transplant coordinators and home dialysis nurses such as Cheryl Cress, Shawna McMichael, Darlene Feiling, Stephanie Torrence, and Kathy Howard. He spent several years in the lab of Dr. Aubrey Morrison learning physiology and pharmacology. "There were days or nights when I walked out of the hospital and I knew that our group of people had done amazing work," he said. "That is probably my fondest memory."



Above: Dr. Miller with his family vacationing by Lake Louise in Alberta, Canada

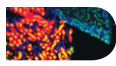


Right: Dr. Miller and his wife Shelley

He spends his leisure time with his wife and four children, one of whom just started as a freshman at WashU. Over the years, he has coached junior basketball and helped with junior baseball, golf and soccer. "I do spend a lot of my time trying to be competent at golf," he said with a laugh.

"I met my wife on the BJH kidney transplant floor, 6500, where she was one of the transplant social workers," he added fondly. "The transplant coordinators thought we'd be a good match and set us up. That's the best thing that has ever happened to me!"

Is he ready for retirement? Not yet. He still feels an urgent sense of stewardship to inspire more physicians to specialize in nephrology. "It's an opportunity and a profound calling to create a better nephrology future long after I am gone," he said. "I can't help thinking that with the care available today, neither of my grandfathers would have experienced ESRD. When I do retire, I'd like to leave nephrology in the state of Indiana in good position."



Program Spotlight

Clinical Innovation Landmark Kidney Transplant Collaboration in Honduras

A major global effort is underway to reshape Latin American transplant medicine, led by WashU Medicine in direct collaboration with the Honduran Society of Nephrology and HSN President Rene Tabora, MD, Cedars-Sinai Medical Center, and the Hackett Foundation. The initiative, which aims to help establish a formalized national kidney transplant care center in Honduras, is spearheaded in large part by WashU transplant nephrologist Massini Merzkani, MD.

For Dr. Merzkani, the mission is deeply personal. A native of Honduras who lived there until 2010 and graduated from the Universidad Nacional Autónoma de Honduras, his involvement represents a vital bridge between world-class institutional expertise and an acute clinical need.

"I am a transplant nephrologist at WashU, but in Honduras, there is a severe lack of infrastructure, education, and knowledge about kidney transplant," he said. "My goal is to help create a transplant center in Honduras so that everyone, including low-income individuals, can get a transplant if needed."

The effort to formalize the global alliance began in 2024 when an initial WashU

delegation—including Drs. Merzkani, nephrologist Marcos Rothstein, and Tarek Alhamad, medical director of kidney and pancreas transplantation—attended the first national nephrology conference in Honduras. Biweekly educational and clinical review meetings via zoom between Dr. Merzkani and colleagues in the Honduran Society of Nephrology maintained the relationship over the next year. By 2025, the team created a baseline transplant nephrology management protocol for Honduras.

With less than one percent of end stage renal disease (ESRD) patients in Honduras having access to kidney transplant, the overwhelming number of patients rely on in-center hemodialysis, a difficult option for those living in rural areas. Few undergo transplant, due to poverty or inability to travel internationally. Complicating the issue is that there are no deceased donor transplants given the lack of law and a formal process, although Dr. Merzkani notes that there is a large living donor population in Honduras.

As the global alliance grew, Nasry Asfura, President of Honduras, formally invited Dr. Merzkani, Dr. Tabora, and others



Dr. Merzkani (far left) was among several renal specialists who met with Honduran President Nasry Asfura (fourth from left) to develop a formal agreement on renal care in the country.

to a meeting, which ultimately resulted in a historic four-year agreement to build a sustainable renal care infrastructure in the country, including a transplant center. The new agreement also highlights a program that would combine access to primary care and prevention education in rural clinics.

"With the formal agreement now active, we are working on logistics, with a goal of evaluating the very first patients for transplant surgery in the first half of 2027," Dr. Merzkani said. "In addition to Cedar-Sinai, we also have transplant nephrology colleagues in Kentucky joining the collaborative and we are excited to keep moving forward."

WashU-Guatemala Alliance Expands to Honduras via ISN "Trio" Program

Even as efforts are underway to establish the first transplant protocols for nephrologists in Honduras, a parallel global partnership has expanded from Guatemala to include Honduras.

Through the International Society of Nephrology (ISN) Sister Renal Centers partnership program, WashU Medicine has had a highly successful nephrology partnership with colleagues in Guatemala for the last decade. Led by nephrologist Marcos Rothstein, MD, and his counterpart in Guatemala, Vicente Sanchez Polo, MD, the two collaborated with the Guatemalan Social Security Institute and the University of San Carlos to initially research and treat an epidemic of Mesoamerican Nephropathy (MeN), a form of chronic kidney disease that primarily affected low-income agricultural workers. The group's work to improve care eventually earned the ISN's prestigious Level A status, the highest tier in the partnership program, with Guatemala also being deemed an independent regional hub of excellence.

Over the last two years, ISN moved the partnership to a "trio" model, with WashU and now the trained Guatemalan team collaborating to mentor and educate residents and fellows in San Pedro Sula, Honduras.

"We accomplished something that we are very proud of because we are only one of only three pairs in the U.S. that have graduated from the ISN sisterhood program," says Dr. Rothstein. "Having graduated, the fully matured Guatemalan program has developed its own fellowship training capacity and is ready to co-mentor a newer, emerging medical community. Their chosen 'little sister' is Honduras."

Dr. Rothstein is excited to build new collaborations to ensure that Honduras becomes another ISN regional hub of excellence. In the meantime, he continues his work in Guatemala, most recently coordinating the delivery of 30 dialysis machines and custom chairs, which were in addition to more than 400 surplus permanent dialysis catheters donated over the last few years. Regular medical conferences and regional Latin American symposiums will continue to enhance care and global partnership. Dr. Rothstein also says that Guatemalan fellows will continue to come to WashU for short

clinical rotations with nephrology and attending fellows here.

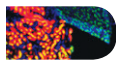
"We are working together to ensure that what we have learned about transforming kidney care in Guatemala is shared with our counterparts in Honduras,"

said Dr. Rothstein. "We are working to create a self-sustaining regional network for kidney health throughout Central America."

Regarding Dr. Merzkani's efforts to develop the transplant nephrology program in Honduras, Dr. Rothstein added, "What he has done is so important. He was identified by the president and leaders in Honduras to develop his program. This alone is a lifelong achievement, an immense contribution, to global kidney health initiatives."



Dr. Rothstein (right) with Dr. Herbert Ferrer, President of the Guatemalan Society of Nephrology.



Research Highlights

Three WashU Nephrology Investigators Awarded 2026 KidneyCure Grants

Three researchers within WashU Nephrology are the recipients of 2026 KidneyCure grant awards. Kenji Matsui, MD, PhD, and Shivani Sharma, PhD, received 2026 Ben J. Lipps Research Fellowships, which provide early-career investigators with protected time, resources and mentorship to build meaningful research programs in nephrology. Moe Majoub, PhD, received a grant from the KidneyCure Bridge Grant Pilot Program, which supports promising kidney research moving forward despite cuts in federal funding for research.

Dr. Matsui is a postdoctoral fellow in the laboratory of Benjamin Humphreys, MD, PhD, the Joseph Friedman Professor of Renal Diseases in Medicine and Chief of WashU Nephrology. He is investigating why some injured kidney tubule cells fail to fully repair after acute kidney injury and instead contribute to the progression of chronic kidney disease. Specifically his grant will fund research on the role of NFAT5, a stress-responsive transcription factor, in

regulating failed-repair proximal tubular cells after kidney injury. By integrating genetically engineered mouse models with omics approaches, he hopes to define how NFAT5 influences the development and function of these cells and to identify pathways that could be therapeutically targeted to improve kidney repair.

Sharma is a postdoctoral fellow in the laboratory of Leslie Gewin, MD, the Alan A. and Edith L. Wolff Professor of Renal Diseases. Sharma is exploring how targeting mitochondrial metabolism may protect against chronic kidney disease. With support from the KidneyCure Fellowship grant, Sharma will use in vivo CKD models and in vitro proximal tubule systems to test whether MPC2 inhibition activates AMPK-dependent mitophagy and shifts tubular cell metabolism away from glucose use and back toward fatty acid oxidation. Her studies integrate genetic and pharmacologic approaches with advanced metabolic and imaging techniques to determine how MPC inhibition preserves kidney function and reduces fibrosis.



Kenji Matsui, MD, PhD



Shivani Sharma, PhD



Moe Majoub, PhD

Mahjoub, co-director of the WashU Ciliopathy Research Institute, is a nationally recognized physician-scientist studying nephronophthisis-related renal ciliopathies (NPHP-RC), a group of congenital kidney disorders partly caused by defects in the centrosome–cilium organelle complex. His lab has developed transgenic mouse models and patient-derived kidney organoids to investigate how ciliary and centrosomal dysfunction drives early-onset cystic and fibrotic kidney disease. His team has identified several pathways that may contribute to disease progression. The KidneyCure bridge grant will support comprehensive preclinical testing using genetic tools, repurposed drugs, and combination therapies. The Foundation established the Bridge Grant Pilot Program in 2025 to help support NIH R01 applicants whose kidney research applications were highly ranked but unfunded due to federal funding cutbacks.

WashU Nephrology-Led Team identifies New Therapeutic Target for ADTKD

A multi-institutional team led by WashU Nephrology's Ying Maggie Chen, MD, PhD, FASN, has found that the protein MANF can clear toxic mutant uromodulin buildup and reverse cellular damage in human kidney organoids. The breakthrough study, published in the *Journal of Clinical Investigation* this past summer, utilized patient-derived induced pluripotent stem cells to model and then treat Autosomal Dominant Tubulointerstitial Kidney Disease (ADTKD-*UMOD*), a genetic disease that currently has no effective treatment options.

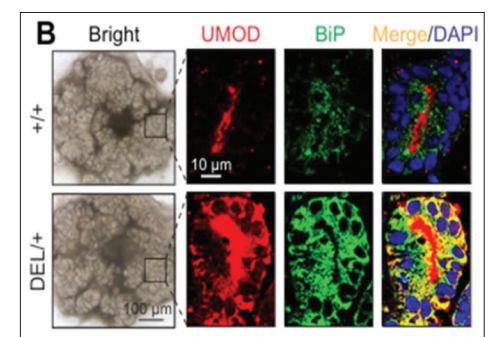
ADTKD-*UMOD* occurs when genetic mutations force kidney cells to produce misfolded uromodulin (UMOD) proteins.

These defective proteins eventually become trapped inside the endoplasmic reticulum (ER) of cells, eventually destroying those cells and causing kidney failure.

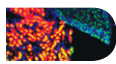
Dr. Chen, along with postdoctoral researchers in her lab and co-first authors of the study, Chenjian Gu, PhD, and Yili Fang, MD, PhD, worked with other colleagues at WashU, Wake Forest School of Medicine, and the University of Helsinki in Finland to determine the drivers behind the cellular destruction and found that misfolded UMOD triggers ER calcium leakage. The leakage then activates a protein called TRIB3, which shuts down the cell's natural waste-disposal system. Building on this discovery, the team introduced MANF, a protective ER chaperone protein, into the lab-grown tissue and found that MANF stabilized ER calcium levels, halted destructive leakage, and turned the waste-disposal system back on, eventually clearing the mutant UMOD.

The findings position MANF as a promising therapeutic strategy and establish ADTKD organoids as a powerful human platform for future drug screening.

Dr. Chen, a nephrotic syndrome specialist who treats rare, protein-spilling kidney diseases, directs the Nephrotic Syndrome Clinic and the ADTKD Center within WashU Nephrology.



The research, "MANF Clears Mutant Uromodulin in Human Kidney Organoids of Autosomal Dominant Tubulointerstitial Kidney Disease," appeared in JCI on August 25, 2026.



Faculty News and Awards

Jain Named Distinguished Professor

Sanjay Jain, MD, PhD, has been named the Mabel Dorn Reeder Distinguished Professor of the Department of Medicine. Dr. Jain, founding Director of the Kidney Translational Research Center (KTRC) at WashU, has been on faculty for 20 years and is a leading national kidney researcher.

In his lab, Dr. Jain is advancing the understanding of 2D and 3D organization of the human kidney across the lifespan, creating comprehensive cellular maps of both healthy and diseased human kidneys. In announcing the professorship, Victoria Fraser, MD, the Adolphus Busch Professor of Medicine and Chair of the Department of Medicine, stated that Dr. Jain has been one of the most highly funded investigators by the NIH at WashU for several years. "His work defined how kidneys repair after

injury and revealed their three-dimensional neurovascular architecture, discovering 'mother glomeruli' as central hubs of neural connectivity to harmonize the activity of a million filtering units," she stated.

The endowed chair is named for Mabel Dorn Reeder, a philanthropist whose foundation funds distinguished professorships and programs at WashU. As founder of the KTRC, Dr. Jain oversees a premier biorepository that provides clinical data and biospecimens from more than 4,000 adult and pediatric patients with kidney diseases for access to researchers worldwide and develops methods to apply cutting edge single cell and spatial technologies that are compatible on small amounts of biopsy tissue. He also directs the WashU Pediatric Center of

Excellence in Nephrology (PCEN), one of three NIH-funded centers in the country to advance pediatric kidney research.



Sanjay Jain, MD, PhD

"I am incredibly honored and humbled to be named the next Mabel Dorn Reeder Distinguished Professor," said Dr. Jain. "This professorship will allow my team to continue our work to understand how the human kidneys and lower urinary tract are organized at the molecular, structural, and functional level in health and disease across the lifespan and use this knowledge to find better cures for kidney disease."

Will Ross Retires

After a distinguished career at WashU Medicine, Will Ross, MD, MPH, Alumni Endowed Professor of Medicine, Nephrology, and Associate Dean for Diversity, is retiring at the end of this year. Dr. Ross, a 1990 alumnus of our Nephrology Fellowship Training Program, has been on faculty since 1996 and first served as director of the hemodialysis unit and then vice president of medical affairs at the former St. Louis Regional Medical Center. He also is a past chairman of the St. Louis City Board of Health and the Center for Disease Control and Prevention's Health Disparities Committee and co-founded



Will Ross, MD, MPH

the Casa De Salud Latino Health Center in St. Louis. He also established the Saturday Free Health Clinic and helped to create the St. Louis Regional Health Commission. He has long been a strong advocate for

health equity and been instrumental in developing curriculum and programs in public health. When he was honored with an endowed professorship in 2021, Dr. Ross said, "We have to have a diverse healthcare workforce to address the diverse needs and challenges within the communities we serve. Then we must reach out, roll up our sleeves, and create alliances within those communities and work together to eliminate barriers to care." We celebrate Dr. Ross' many achievements and know that he will probably remain active in healthcare issues even after retirement!

WashU Fellow Maheen Khan Joins Faculty

Maheen Khan, MD, a 2026 graduate of our Nephrology Fellowship Program, has joined the faculty of WashU Nephrology. Dr. Khan is recognized for exceptional clinical skills, compassionate patient care and professionalism. She earned her medical degree from Dow Medical College in Pakistan and

completed her internal medicine residency at Louisiana State University in Shreveport, LA. While a fellow in our training program, Dr. Khan was the recipient of the 2025 Knowlton Incentive for Excellence Award, presented annually by The Foundation for Barnes-Jewish Hospital.



Maheen Khan, MD

Business Round Up in the Lone Star State

WashU Nephrologists Trade White Coats for Cowboy Hats at the 2026 NBLU

Three of our second-year fellows, Jacob Lambertsen, MD, Bibi Razak, MD, and Meng Lee, MD, attended this year's Nephrology Business Leadership University (NBLU) conference for a weekend of mentorship, leadership, and career development. They joined WashU alumni Dr. Irfan Agha (President, Dallas Renal Group), Dr. Gopa Green (U.S. Renal Care) and Dr. Gary Singer (President, Renal Physicians Association), along with Dr. Benjamin Humphreys (Division Chief, WashU Nephrology; ASN Executive Councilor), who participated in the leadership session. The weekend brought generations of WashU nephrologists together with a little Texas flair – cowboy hats included!



WashU Nephrology Division Chief Benjamin Humphreys, MD, PhD (center), joins fellows and Division alumni at the Nephrology Business Leadership University (NBLU) conference – tipping their hats to mentorship and leadership at the conference while in Texas.