As part of our commitment to improving the lives of people living with rare diseases Alexion, AstraZeneca Rare Disease supports quality, independent Continuing Medical Education (CME) designed to enhance patient care and health outcomes.

This call for grant applications provides public notice of availability of funds to address areas related to the multidisciplinary care of patients with thrombotic microangiopathy (TMA), including atypical hemolytic uremic syndrome (aHUS).

Deadline for Submission	15th January 2027
Decision Notification	No later than 8th February 2027. Applications submitted before the deadline may receive an earlier decision.
Primary Area of Focus	Rare Disease
Therapeutic Area	Nephrology – thrombotic microangiopathy (TMA), atypical Hemolytic Uremic Syndrome (aHUS)
Geographic Focus	Global
CGA Code	AX011
Intended Audience	Pathologists/Renal Pathologists/Nephrologists
Budget	Up to $165,000
Educational Need	Thrombotic microangiopathy (TMA) is characterized by endothelial injury and microvascular thrombosis and may present as either a systemic syndrome with microangiopathic hemolytic anemia and thrombocytopenia or as renal-limited TMA, defined by kidney biopsy evidence of TMA in the absence of overt systemic hematologic features. Morphologic findings include endothelial swelling, mesangiolysis, glomerular and arteriolar thrombi, capillary wall double contours, and chronic vascular remodeling, leading to ischemic tissue injury and organ impairment, particularly in the kidneys. [1,2] There are several types of TMA, including thrombotic thrombocytopenic purpura (TTP; characterized by an acquired or congenital deficiency of a disintegrin-like metalloprotease with thrombospondin type 1 motif, member 13 [ADAMTS13])[3-5], hemolytic uremic syndrome caused by Shiga toxin-producing *Escherichia coli* (STEC-HUS)[6], and other TMAs that manifest in relation to a trigger, including (but not limited to) autoimmune disease, infection, malignant hypertension, pregnancy, transplantation, and drugs[7,8] Atypical hemolytic uremic syndrome (aHUS) is a progressive rare TMA that, if untreated, can result in severe kidney damage and death. aHUS is caused by complement dysregulation that leads to uncontrolled terminal complement activation, that can manifest in the presence or absence of a trigger or associated condition[8-10]. Given the rare nature of the disease, often complex clinical presentation, and no specific diagnostic test for aHUS, timely diagnosis and treatment for aHUS remains a challenge[11]. No TMA has distinguishing morphologic features on biopsy, so clinical information is critical to the diagnosis.[11] Further, TMA recognition has historically centered on systemic hematologic manifestations; consequently, renal-limited TMA and its biopsy features may be underrecognized and underreported in clinical practice.

	Alexion, AstraZeneca Rare Disease seeks to support independent medical education designed to develop practitioners' understanding of: • The spectrum of thrombotic microangiopathies, their underlying mechanisms, and the role of complement dysregulation in aHUS. • Clinical presentations of aHUS, including systemic, partial hematologic, and apparent kidney-limited phenotypes, and considerations for timely recognition and evaluation. Case studies in trigger-associated aHUS (e.g., autoimmune, drug-induced) particularly encouraged. • Histopathologic features of TMA on kidney biopsy, pathology reporting considerations, and effective communication of findings that may influence diagnostic assessment and patient management. • The clinical significance of TMA identified on kidney biopsy, including presentations with absent or incomplete hematologic manifestations, and the importance of integrating biopsy findings into multidisciplinary evaluation.
Educational Design and Focus	Alexion funding is intended to support multi-modal programs (i.e. with live/virtual and/or enduring components) including but not limited to: • Symposium (face-to-face or virtual) that will be developed into a virtual enduring program. Slots should be secured by grant recipient. • Interactive self-directed programs designed for impactful learner engagement using proven distribution channels.
Application Requirements	**Proposal must be independently developed and include the following:** • **Needs Assessment/Gaps/Barriers:** Include a comprehensive, well-referenced needs assessment that provides a detailed description of the educational / practice gaps and barriers of the target audiences. The needs assessment must be independently developed and validated by the educational provider. • **Audience Generation:** Describe methods for reaching the target audience(s) and any unique recruitment methods that will be utilized. • **Educational Strategy:** Provide clearly defined and measurable learning objectives that are clearly designed to address the identified gaps and barriers. The proposal should demonstrate an understanding of instructional design issues as they relate to the gaps in the knowledge, competence, or performance of the targeted audience. • **Program Evaluation and Outcomes:** Provide a description of the outcomes methodology that will be employed to measure the impact of the educational program and how these results will be presented, published, or disseminated. Additionally, describe the methods that will be used to determine the extent to which activity has served to close the identified healthcare gap. Programs should include an outcomes plan of at least Moore's level 4. • **Budget:** Include a detailed budget with rationale, including breakdown of costs for content per activity, out-of-pocket cost per activity and management cost per activity.

	• **Accreditation:** Programs must be accredited and fully compliant with all ACCME Criteria and Standards for Commercial Support℠.
Applications	**www.alexion.com/grants** All applications must be submitted via the AstraZeneca CyberGrants system **here**. For queries, please contact **grants@alexion.com**. ***Important:*** *Due to the end-of-year shutdown, the grants system will not accept new applications from 4 December 2026 to 4 January 2027. Please submit new applications outside of this window, and no later than the 15 January 2027 submission deadline.*

References

1. Arnold DM, et al. CMAJ 2017;189. E153-9.
2. Halimi JM, et al. Kidney Int Rep (2025) 10, 1950–1959.
3. Zheng XL. Annu Rev Med 2015;66:211–25.
4. Chung CH, et al. Medicine 2021;100:e25986.
5. Raina R, et al. Ther Apher Dial 2019;23:4–21.
6. Noris M, et al. Nat Rev Nephrol 2012;8:622–33.
7. Palma LMP, et al. Kidney Int Rep 2021;6:11–23.
8. Goodship TH, et al. Kidney Int 2017;91:539–51.
9. Java A, Hematology, 2024, Vol 2024 (1), 200-205.
10. Licht C, et al. Nephrology, 2024, 29, 519–527.
11. Vivarelli M, et al. Kidney Int, 2024,106(3), 369-391.
12. Bonsib SM. Atlas of Medical Renal Pathology (2013).

Program Requirements: The Program must be planned and executed as an accredited activity and fully compliant with the criteria and/or standards of commercial support for ACCME, AAFP, AOA, ACPE, ANCC, AANP, or NCCPA. Furthermore, the program will be educational and nonpromotional in nature and will be planned, designed and implemented in accordance with the U.S. Food and Drug Administration's Guidance on Industry-Supported Scientific and Educational Activities ("Policy Statement").

The Policy Statement and the ACCME Standards require, among other things, that (i) Institution conduct the Program independently and without control or influence by Alexion/AstraZeneca over the Program's planning, content (including the selection of speakers or moderators), or execution; (ii) the Program be free of commercial bias for or against any product; (iii) Institution make meaningful disclosure of Alexion, AstraZeneca Rare Disease support of the Program and any prior relationship between Institution and Alexion/AstraZeneca, and the relationship, if any, between Alexion/AstraZeneca and the speakers selected by Institution; and (iv) Alexion, AstraZeneca Rare Disease not engage in, and Institution not permit any other sponsor to engage in, promotional activities in or near the Program room or advertise its products in any materials disseminated as part of the Program.

In addition, Institution is required by the Policy Statement and, if applicable, accreditation standards to ensure that any product discussions at the Program be accurate, objective, balanced and scientifically rigorous. This includes a balanced discussion of each product and of treatment alternatives, that limitations on data be disclosed, that unapproved uses be identified as such, and that for live presentations there be opportunities for questioning or debate.