Author's response to reviews

Title: Survival prognosis after the start of a renal replacement therapy in the Netherlands: a retrospective cohort study

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Author's response to reviews: see over
Dear editor,

Hereby I send you my revised manuscript with the title “Survival prognosis after the start of a renal replacement therapy in the Netherlands”. It is a revision to the earlier submitted version, based on the requested changes in an email from 31/1/2013.

In the methods-section of the article a few sentences have been added on the approval of the use of the data from human subjects in our research. The procedure is as follows. All patients registered in the Dutch renal replacement registry have given prior written informed consent to their physicians for submission of their data to the Dutch renal replacement registry, in order to be used for the improvement of treatment strategies for kidney patients. The Dutch renal replacement registry has a management committee that is responsible for the use of the data and has to approve all data-requests. Further in this revision some format changes have been made to the title page, the competing interests section, the author’s contributions, the references and figure 1.

The reason to submit this article to the BMC Nephrology is that, until now, there is not one single model available that can predict survival of patients after starting renal replacement therapy, from the initial phase to death, taking into account both survival on dialysis and survival after an eventual transplantation. The available models either predict survival on dialysis until transplantation, or survival on the transplant waiting list, or survival after transplantation.

The model presented in this manuscript shows that a reasonable accurate estimation of survival can be made, based on a few easily obtainable predictors at baseline (90 days after the start of renal replacement therapy). From the reactions on the presentations of preliminary results on a few national and international congresses/seminars, we understood that this information is very interesting to nephrologists treating patients with end stage renal disease.

The results presented in this paper have not been published previously in whole or part, except in abstract form.

I hope that you will find this manuscript suitable for publication in BMC Nephrology.

Yours sincerely,

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