Reviewer's report

**Title:** U-shaped association of central body fat with urinary albumin-to-creatinine ratio and microalbuminuria

**Version:** 1  **Date:** 12 July 2012

**Reviewer:** HO JUN CHIN

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1. The prevalence of CKD (defined GFR <60 in method section) in both genders is quite different but the level of GFR is not so lower in women compared to men. Are you sure the CKD prevalence of women is 11.4%? If so, would you show the each frequency of CKD stage (stage IIIA, IIIB, IV, V) in both genders?

2. The U-shaped correlation was evident only between microalbuminuria and WC in table 2. However, UACR level as continous variable is different in groups of WC, WhtR, an BMI. What is the meaning of small difference of UACR, not reached to the criteria of microalbuminuria, among groups?

3. You may confirm again your conclusion after stratification of the participants with gender or age criteria (divided with 50 year-old), because, the fat distribution and BMI are known to be dependent on gender and aging.

4. When you adjusted the Model of ANCOVA or logistic regression, how you select the co-variates, such as age, gender, DM, HTN?

Other factors such as lipid profile, BP levels, etc which are known to be related to CKD or MICROALBUMINURIA, were not considered?

**Level of interest:** An article of limited interest

**Quality of written English:** Not suitable for publication unless extensively edited

**Statistical review:** Yes, but I do not feel adequately qualified to assess the statistics.