Reviewer's report

Title: Home care utilization in chronic kidney disease: a systematic review

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Reviewer: Gianfranca Cabiddu

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Major points:

- the paper deals only with dialysis patients, and the title is on CKD. Even if the Authors searched also data on CKD, the title should be coherent with the findings.

- the search strategy should be reported, instead of a long list of "conceptualizations" that in effect are not in line with the finding; for example on CKD, as no study was found on this issue. The lack of studies is a finding that should be commented upon.

- the lack of explicit search strategy is a major point in particular on a subject for which MESH terms are hardly found, and in a field in which the definitions (CKD first) remarkably changed over time.

- Furthermore, the study selection, in the methods is not fully clear.

- There is no clear definition of the interventions: more data should be given on the type of help: for example on PD: each dialysis, once in a while. In the table this is not clear and adding the frequency of the visits is very important. Furthermore, under the heading of home care intervention we find how the nurses etc are paid and not the type of intervention (how often, how long etc).

- as they are now, the tables have several pitfalls: table 1 reports only few data, table 2 too many.

- table 2 is complex, not well summarized and almost impossible to read: it may be split in 2, or for example the information of Country, type of study and setting and period could be merged to table 1.

- table 3 reports only on the outcomes chosen, but doesn't add, in my opinion to the reader's knowledge unless the results are also added.

- table 4 is a quality analysis that could be summarized for example by moving the headers in a legend, leaving the Y-N-P in a single (readable) row.

- As a consequence of the lack of precision in the definition and description of the interventions, the discussion is quite generic and I think that the Authors should make an effort not only in highlighting the gaps in the knowledge (well known by any expert who'd go to read the paper) but in suggesting something useful for the
dialysis clinicians who want to organise or adapt a network of home care.