Reviewer’s report

Title: A multidisciplinary program for achieving lipid goals in chronic hemodialysis patients

Authors:

Rebecca A Viola (rebecca.viola@na.amedd.army.mil)
Kevin Abbott (kevin.abbott@na.amedd.army.mil)
Paul Welch (paul.welch@na.amedd.army.mil)
Robichaud McMillan (robindaud.mcmillan@na.amedd.army.mil)
Aatif Sheikh (aatif.sheikh@na.amedd.army.mil)
Christina Yuan (christina.yuan@na.amedd.army.mil)

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Reviewer: Prof Christoph Wanner

Level of interest: A paper whose findings are important to those with closely related research interests

Advice on publication: Accept after discretionary revisions

This report describes a retrospective review of a pharmacist-directed hyperlipidemia management in a low number of HD patients. 26 patients entered the program, 15 were at target LDL-cholesterol. No control group is available. After 6 months another 8 patients reached target LDL-C. The number of adverse drug reactions were high.
The most interesting statement for this reviewer was "a team approach is more effective than management by a single physician".
The most unpleasant statement was that "consensus is growing for statin use......". We do not need consensus, we need data on safety and outcome in large number or kidney patients (See Baigent et al below)

There are several suggestions that should be addressed:

a) Discretionary revisions

Background:
(1) > 95 % of studies show that elevated LDL cholesterol (not LDL level; please change throughout the paper) is not an independent risk factor for HD patients. In fact patients show reverse epidemiology and LDL cholesterol is usually low.
(2) Ref 3 are registry data and this should be mentioned.
(3) Ref 8 can be omitted

It is scientifically difficult to talk about a Pioglitazone drug interaction when LDL increases by 5-7%. This increase is in the range of day by day variation.

Was the compliance, as measured by refill frequency, > 75% ?

The last paragraph of the discussion is not without criticize. When
embarking in such a discussion it should also mentioned why nephrologist give lipid lowering not a high priority. This issue is discussed in Baigent et al. Lancet 2000; 356:147-52 or discussed in Nephrol Dial Transplant. 2000;15:1118-9 "Should we reduce blood cholesterol to prevent cardiovascular disease among patients with chronic renal failure?".

Laboratory monitoring: lipid panel = lipid profile; A lipid profile consists of TC, TG, HDL-C and LDL-C (eventually Friedewald LDL-C). Please underline that your lipid profile consisted of........

Pagination numbers were missing

**Competing interests:**

None declared.