Author's response to reviews

**Title:** The IgA nephropathy Biobank. An important starting point for the genetic dissection of a complex trait

**Authors:**

- Francesco P Schena (fp.schena@nephro.uniba.it)
- Giuseppina Cerullo (biolmol@nephro.uniba.it)
- Diletta D Torres (diletta@katamail.com)
- Francesco Scolari (fscolar@tin.it)
- Marina Foramitti (gambindemerlo@hotmail.com)
- Antonio Amoroso (amoroso@burlo.trieste.it)
- Doroti Pirulli (pirulli@burlo.trieste.it)
- Jurgen Floege (juergen.floege@rwth-aachen.de)
- Peter R Mertens (Pmertens@ukaachen.de)
- Klaus Zerres (kzerres@post.rwth-aachen.de)
- Efstathios Alexopoulos (helbil@spark.net.gr)
- Dimitrios Kirmizis (kirmizis@med.auth.gr)
- Leopoldo Zelante (genetica@operapadrepio.it)
- Luigi Bisceglia (l.bisceglia@operapadrepio.it)
- Gian M Ghiggeri (labnefro@ospedale-gaslini.ge.it)
- Giovanni M Frasca (gm.frasca@ao-umbertoprimo.marce.it)

**Version:** 2  **Date:** 5 October 2005

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Dear Editor,

Thank you very much for the review of our manuscript. We would like to emphasize that our database can be searched without requiring a password and that the password is only necessary to insert and to modify data (page 10, lines 6-10).

We have revised the manuscript following the suggestions of the two referees.

**Referee No.1**

1. We clearly state in the manuscript that the patients and controls are matched for age, gender and ethnicity. Page 12 (lines 18-19); page 13 (lines 11-13)
2. In the manuscript we describe the problems related to population admixture and the measures taken to avoid them. Page 14-16
3. Details on the racial aspects of each population are given. Page 13 (lines 1-4)

**Referee No.2**

1. The genes (page 13 lines 22-24; page 14 lines 1-3) and biological and immunological parameters (page 8 lines 18-22) to be examined are detailed in the manuscript. Patients and relatives are informed during the counselling on the genetic studies to be carried out and that all results would be freely available on the web site (page 12 lines 14-15; page 14 lines 1-3).
2. The IgA nephropathy is characterized by recurrent episodes of macroscopic hematuria or persistent microscopic hematuria with or without proteinuria (page 7 lines 12-15), but the diagnosis is possible only with a renal biopsy. The renal biopsy policy differs from country to country. In Europe the presence of persistent microscopic hematuria without proteinuria is not considered an absolute indication to renal biopsy. Instead, the occurrence of proteinuria, with or without microscopic hematuria, is a clear indication to renal biopsy that leads to a precise diagnosis.
3. Only the partners of the IgAN Consortium have access by a personal password, to insert and modify clinical and laboratory data in the database (page 10 lines 6-10). All information on the web site construction and management are given in page 9 lines 19-21.

Minor Essential Revision
1. Healthy control group was better defined in Page 12 lines 17-19.

Best wishes