Title: Health related quality of life in patients in dialysis after renal graft loss. Effect of gender.

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Author's response to reviews: see over
Second rebuttal letter to the Editor-in-Chief of BMC Women’s Health regarding the article:

“Health related quality of life in patients in dialysis after renal graft loss. Effect of gender”.

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Dear Editor-in-Chief.

Thank you for reviewing our revised manuscript. We have considered the new proposals, and find the new comment relevant to the article. Therefore, a new section addressing our finding is added to the discussion part. We appreciate the new revision from the reviewer, and are thankful for the thorough work with our manuscript. A detailed response to the reviewer comments follows:

Referee nr. 2 (C.G):

1. Comment from the reviewer: First sentence in Abstract - replace has with have.

Answer: We have replaced “has” with “have” in the first sentence in the Abstract section (line 3).

2. Comment from the reviewer: “Methods in Abstract - logically, the statement regarding conduct of separate analyses by gender should follow the sentence about examining interactions with gender and loss”

Answer: We agree that it is more logical to place the sentence regarding separate gender analyses after the sentence addressing interactions of gender and graft loss, and this rearrangement of the two sentences have been undertaken. (“Methods” in the Abstract, line 17).

3. Comment from the reviewer: Page 10 – older age associated with better cognitive function – comment on this anti-intuitive finding.

Although some aspects of HRQOL might be better preserved in older than in younger dialysis patients, we agree that it is anti-intuitive that older age is associated with better cognitive function in male patients. As the item “cognitive function” was based on self-reported evaluation, the finding may reflect that younger patients have higher expectations to health than older. However, the KDQOL item “cognitive function” has been shown to be a poor determinant of neurocognitive performance in hemodialysis patients, with a low sensitivity and specificity.

We have inserted a section on this surprise finding in the discussion part (page 11 lines 242-249).