Author's response to reviews

Title: Ethical issues relating to renal transplantation from prediabetic living donor.

Authors:

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Version: 3 Date: 14 May 2014

Author's response to reviews: see over
13 May 2014

Dr Fernando Marques  
Executive Editor, Biomed Central  
BMC Medical Ethics

Dear Dr Marques,

RE: Ethical issues relating to prediabetic living kidney donors [MS: 1571291439106162]

Thank you for sending us the comments on our paper. We have carefully revised the manuscript taking into consideration your comments and those of the two reviewers. We believe that the manuscript has been further strengthened by revision.

Reviewer 1

1. Although living donation is a perfect possibility to avoid dialysis it is important to show that no end-stage-renal patient has to die if no donor is available. So if any risk exists for a potential donor the donation must not be performed. This paper is important to make this clear.

   Answer: We agree—thank you for highlighting this. We follow your suggestion and added some lines to make this clear (pages 10 and 11).

Reviewer 2

Major compulsory revisions

2. Page 4, first paragraph: chronic kidney failure may also be treated with dialysis.

   Answer: We agree. We follow your suggestion and added some lines to make this clear (pages 10 and 11).

3. The second half of the first paragraph should be revised and perhaps placed later in the background. The third paragraph would be more appropriate.

   Answer: Thank you for suggesting this clarification. We have amended the manuscript.

4. Are there studies out there that have shown that pre-diabetes is not a risk favour for DM2? If so, could you mention these as well to present a balanced argument?

   Answer: The discussion section has been re-written. Thank you for raising this important point.
5. As there is evidence on both sides of the increased risk, the discussion should be organized differently. It is difficult to follow.

   Answer: Thank you for suggesting this clarification. We have amended the discussion section.

6. The paragraph beginning with “In the hypothetical case…” should be removed. It distracts from the argument.

   Answer: We agree. The paragraph was removed.

7. On page 7, you bounce back and forth between the different increased risks of prediabetes. Perhaps, organize each risk into its own sub-heading with logical argument flow.

   Answer: Thank you for flagging this important issue. We have followed your suggestion.

8. What do you mean by “the use of a kidney from a living-donor prediabetic” is of “questionable beneficence” on page 10? Those kidneys from this population do not have the same outcomes as other kidneys? Do you have outcome data that supports this?

   Answer: Thanks for this. We have re-written the paragraph and that statement was eliminated.

Minor essential revisions

9. “Renal receptor” should be replaced with the terminology “renal recipient”.

   Answer: We agree. We have replaced “renal receptor” for “renal recipient”.

10. The section title “cultural difference” is deceiving, as I took it to mean only socio-demographic cultural differences. Perhaps another title would be more appropriate.

   Answer: We agree—thank you for highlighting this. We have already amended that section, which it is now named “The argument from a Mexican perspective”.

11. Page 11, last paragraph: do you mean “prohibit the donation from minors etc.” and not “to minors”?

   Answer: We corrected this mistake; now it said: “prohibit the donation from minors” (page 9).
Additional editorial requirements
12. We recommend that you copyedit the paper to improve the style of written English.

Answer: As for typographical errors, the manuscript has been edited by a native–English speaker with scientific expertise.

We are grateful for the comments and suggestions and we hope the revised manuscript will be accepted for publication in BMC Medical Ethics.
Sincerely,

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Aldo Ferreira                          Edith Valdez                          Miguel Bedolla