Author's response to reviews

Title: Design and Implementation of the First Nationwide, Web-based Chinese Renal Data System (CNRDS)

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Author's response to reviews: see over
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Dear Editor:

MS: 1749332467586594

Thank you very much for your letter dated on Oct 18th, 2011 and for the comments of our manuscript submitted to BMC Medical Informatics and Decision Making: “Design and Implementation of the First Nationwide, Web-based Chinese Renal Data System (CNRDS)”. 

Our revised manuscript, and list of responses are attached. The revised parts are indicated with yellow highlight in the revised manuscript.

We would sincerely like to thank the reviewers for their critical and helpful comments and advices.

Yours most sincerely,
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List of Responses to the Comments

We would like to thank the reviewers for their constructive comments concerning our manuscript (MS: 1749332467586594). Our point-by-point responses to each of the reviews’ comments are as follows:
Referee 1:
Comment 1. You did not discuss your work in comparison with any other work in China or worldwide. Even if unsure about other applications within nephrology, your technical work is quite unspecific and can be used for other disease as well. You used nearly all references within the methods chapter, quoting no other work for discussion. For this paper being more than a technical report about a state of the art, but not very special, web based IT-system, you must compare your work with those of fellow researchers in medical informatics. Please let me give you some questions as examples for a discussion: Which experiences, you read about, did you use in which ways? Is the workflow of gathering the data comparable to others? What are the specific things you did in the same way or different and why? What are the advantages and/or disadvantages of your work in comparison with others? Such a discussion is very important so that I as a reader would have learned something and would have gotten some of your experience. I would avoid mistakes in my own work.

Response 1: Our system has been compared with 3 renal registries worldwide (US Renal Data System, UK Renal Registry, Australia & New Zealand Dialysis and Transplant Registry) and 3 local registries (Shanghai, Beijing and Zhejiang Renal Registry) in China. Please see the discussion section (From Line 9 on Page 13 to Line 2 on Page 15) of the revised manuscript for detail comparisons. The advantages of CNRDS are flexibility, easy to access, and social networking, which are summarized as Table 5 in the manuscript.

Comment 2. Some phrases e.g. “forms populated” or “to maximum the value” should be corrected.

Response 2: We changed some phrases, e.g. “populated” to “filled in” (Line 21 on Page 9), “To maximum the value of the previous investment” to “In order to maximize the value of the previous investment” (Line 23 on Page 12).

Referee 2:
Comment 3. This is an excellent, well written article. The reader would be interested in more data about the BBS online forum, how many messages are exchanged in what period of time, what types of messages, has the BBS had a positive influence on patient care, can this be numerically documented, is there a rigorous effort to evaluate the positive effect of these communications? The term BBS is no longer much used in
the rest of the world. It causes one to remember a time of much slower dialup connections to the Internet when the Web was still young. Is the term BBS still widely used in China? It only needs to be changed in this report if the term is not widely used today in China.

Response 3: The online forum usage is summarized in the results section (From line 12 to line 19 on Page 12 in the revised manuscript). From April 22nd, 2010 to Nov 15th, 2011, 2,441 threads composed of 9500 messages were exchanged on the forum. Table 4 shows a summary of topics and threads. At the first couple of months when the CNRDS just launched, physicians are not familiar with it, most of the posts are about how to use the system. After that, topics are more and more concentrated in the discussion of dialysis. Weekly digest of the forum posts are reported to the Board of the Chinese Society of Nephrology. The online forum has been an important communication channel for nephrologists and had a positive influence on patient care. The term “BBS” is still used in China to refer to online discussion forum, though they’ve been changed from terminal-based to web-based. According to the reviewer’s suggestion, we no longer used this term in our manuscript to avoid confusion; “online discussion forum” or “online forum” are used instead. Figure 1 has been updated since the term “BBS” was on the drawing.

We also adjusted the format of the manuscript to conform to the journal style for Type 3 correspondence articles.