Author’s response to reviews

Title: Longitudinal study of leptin levels in chronic hemodialysis patients

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Version: 2 Date: 3 May 2011

Author’s response to reviews: see over
To: Nehme Gabriel, M.D.

Editor-in-Chief, Nutrition Journal.

Subject: Revision - Nutrition Journal -1355444765525489.

Dear Editor,

Thank you for your letter concerning our manuscript # 1355444765525489 entitled “Longitudinal study of leptin levels in chronic hemodialysis patients”. We have substantially revised the manuscript according to the reviewers’ remarks, which we found helpful, and respond in detail to the comments, below.

We hope that you will find the new version of the manuscript to be suitable for publication in your journal.

We enclose both corrected and clean versions of the manuscript. P-values less than 0.05 are now presented as 3 decimal places in tables, whereas all p-values >0.05 are presented as 2 decimal places. In the corrected version, all additions are underlined in red and all deletions crossed out in blue. All figures were uploaded in TIF format at an appropriate DPI.

Sincerely yours,

Ilia Beberashvili, MD.

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Reviewer's report:

The authors have examined to determine whether changes of serum leptin levels are correlated with nutritional status over time in a cohort of prevalent hemodialysis patients. The study is well designed and well executed.

I have some recommendations to the authors:

- Table 1 gives some base datas. But these are not indispensable. Because you have given the data in your text. The needed data is given in Table 2. You may delete Table 1 from your manuscript.

Descriptive characteristics of the study participants across sex-specific tertiles of leptin are presented in Table 1. This is especially important since leptin is a sex-dimorphic adipokine and most of the variables of interest, such as body composition parameters including fat mass and muscle strength are dependent on sex. Although some data are explained in text (in Results section), the most demographic, clinical and laboratory measures, presenting in univariate and multivariate analyses, across the three equal gender specific tertiles of leptin, are concentrated in Table 1. Table 2 shows the linear associations with the use of univariate and multivariate analyses in whole study population. Therefore Table 1 is important to be included in the paper in our opinion.

- Table 3 and figure 2 gives us similar data. You may delete Table 3 from your manuscript.

We thank the reviewer for this comment. We removed Table 3 from the manuscript. Results section was modified accordingly (see page 12 of the corrected version).
There are some points in Figure 3: This figure is not clear enough. And what are the 3 censored datas?

The 3 censored data in Figure 3 represent right censoring of the data presented separately in each sex-specific tertile of leptin. However, we agree with the reviewer that the Figure 3 should be clearer and comprehensive. Therefore we changed the legend and added the number of patients at risk to Figure 3 for greater clarity.