Reviewer's report

Title: Serial interferon-gamma release assays for latent tuberculosis in dialysis patients with end stage renal disease in a Korean population

Version: 2 Date: 11 May 2015

Reviewer: Suzanne Verver

Reviewer's report:

Although this paper has a relatively small sample size for the proposed objective and analysis, it provides valuable information since serial quantiferon testing was not reported before among renal patients.

Minor essential revisions:

1. Since only 93/150 screened patients had 2 QFT results available, about one third of patients are lost to follow-up and it is important to assess whether this has created a biased patient population. Can the authors comment on this, by giving reasons for having only 1 result, and/or by comparing the groups with and without 2 results?

2. It is unclear at what stage between baseline and follow-up the preventive therapy has started, so how many months of preventive therapy was taken when the second test was done. If only few months, this may be a reason why only few reversions have been found?

3. Results page 8: it seems isoniazid and rifampicin was only prescribed for those with positive QFT test at baseline. Can you confirm that in the first paragraph?

4. In table 1 it seems that there were some differences between HD and PD groups. Is it possible that these differences have influenced the results? If yes, how?

5. Discussion: it is stated ‘within subject variability was minimal’. At the same time main results state agreement was good and abstract states that agreement was fair to good. And in conclusion it states concordance rate was ‘so fair’. Which of these is true? Can these interpretations be harmonized?

6. Discussion page 9: starts by stating that this patient group has different results from previous study. However, no interpretation is given as to why and how this may affect the results.

7. Discussion needs careful checking of the sentences, e.g.
   a. third line: ‘LTBI treatment supposed to decrease’
   b. T-SOPT->T-SPOT
   c. Sentence starting with ‘the main reason why’.

8. Table 2: I do not understand why the denominator both the left and right part of the table is 93. While on top it states for left part n=39 and for right part n=54.
Please clarify or adapt denominator in the calculations. In footnote please explain p-value represents difference between what and what?

9. Figure 1: this seems a selection of only those with positive QFT-IT at baseline. Please clarify in title.

Discretionary revisions:
1. The authors propose alternative cut-off points for defining QFT revisions. Did they apply any of those to the data and did this give meaningful results?
2. Any explanation as to why a large proportion of patients has old TB lesions while zero have been treated before and this is a low incidence country?

Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Acceptable

Statistical review: Yes, and I have assessed the statistics in my report.

Declaration of competing interests:
I declare that I have no competing interests