Reviewer's report

Title: Comparison of Quality-of-Care Measures in Patients with End-Stage Renal Disease Secondary to Lupus Nephritis vs. Other Causes

Version: 2  Date: 22 January 2015

Reviewer: Khaled Abdel-Kader

Reviewer's report:

This review was performed with the assistance of post-doctoral fellow Rocio Figueroa diaz MD.

This is a large, retrospective cohort study comparing quality of care (pre-nephrology care, surrogates for KTx access, perm vasc access at HD initiation) in ESRD LN vs. ESRD other diagnoses. This is a novel study and the authors acknowledge most of the limitations:

Minor essential revisions:
1. limited ability to effectively exclude AKI (~3% of incident ESRD patients based on USRDS) or a very rapidly progressing CKD, AKI on CKD course (e.g., Ohare, AJKD 59:513, >10% with very rapid declines in preceding 24mo in a VA cohort). Inclusion of these patients is likely to lower the rate of achievement of the quality outcomes examined.

2. a) limited ability to determine suitability for KTx: though authors excluded age>70 and adjusted for CVD, the data available does not offer a granular view re: KTx eligibility which is likely to be higher among the LN cohort (younger, fewer comorbidities).

b) KTx provision of information as delineated on 2728 may have limited reliability (see Salter JASN 25: 2871)

3. Was age examined in the regression model for non-linear relationship with outcomes? Were interaction terms (e.g., age*sex) examined?

4. Many of the patient level barriers to permanent vasc access (recently reviewed by Casey AJKD 64:937) would seem to be particularly salient in a younger LN cohort. Additional provider level barriers that could be considered are the increased complexity of these patients (e.g., contraception concerns while on RAAS blockade/MMF, toxicity from IS meds including glucocorticoids, etc) and limited time to discuss multiple concerns and adequately educate and communicate re: the importance of creating a perm vasc access, especially if follow-up visits are inconsistent in this young cohort).

Discretionary revisions:
1. Please consider changing the figure so that the y axis represents proportion of patients wait-listed
Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

I declare that I have no competing interests