Author’s response to reviews

Title: Impact of nephrolithiasis on kidney function

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Author's response to reviews: see over
## STROBE Statement—checklist of items that should be included in reports of observational studies

<table>
<thead>
<tr>
<th>Item</th>
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<td><strong>Title and abstract</strong></td>
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| 1 | (a) Indicate the study’s design with a commonly used term in the title or the abstract. **Study design is indicated in the abstract, page 2, line 31.**  
(b) Provide in the abstract an informative and balanced summary of what was done and what was found. (no changes needed)** |
| **Introduction** | |
| Background/rationale | 2  
Explain the scientific background and rationale for the investigation being reported. **Pages 3-4, lines 54-78.** |
| Objectives | 3  
State specific objectives, including any prespecified hypotheses. **Objectives are stated on page 3, lines 79-82. No pre-specified hypotheses.** |
| **Methods** | |
| Study design | 4  
Present key elements of study design early in the paper. **Key elements of study design, page 4, lines 85-87.** |
| Setting | 5  
Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection. **Pages 4-5, lines 91-109.** |
| Participants | 6  
(a) Case-control study—Give the eligibility criteria, and the sources and methods of case ascertainment and control selection. **Pages 4-5, lines 91-109.**  
Give the rationale for the choice of cases and controls—**Page 5, lines 117-120.**  
(b) Case-control study—For matched studies, give matching criteria and the number of controls per case. **Page 5, lines 122-128.** |
| Variables | 7  
Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers. Give diagnostic criteria, if applicable. **Pages 6 and 7, lines 129-139 and 147-157.** |
| Data sources/ measurement | 8*  
For each variable of interest, give sources of data and details of methods of assessment (measurement). **Pages 4-6, lines 102-103; 110-113; 114-122; 127-128; 129-145.**  
Describe comparability of assessment methods if there is more than one group. **Page 6, lines 148-149.** |
| Bias | 9  
Describe any efforts to address potential sources of bias. **Page 5, lines 123-125. (see also last Cover Letter).** |
| Study size | 10  
Explain how the study size was arrived at. **Pages 4-5, lines 101-109.** |
| Quantitative variables | 11  
Explain how quantitative variables were handled in the analyses. **Page 7, 159-168.**  
If applicable, describe which groupings were chosen and why. **Page 7, 165-166.** |
| Statistical methods | 12  
(a) Describe all statistical methods, including those used to control for confounding. **Page 7, 159-168.**  
(b) Describe any methods used to examine subgroups. **Page 7, lines 164-166.** |
(c) Explain how missing data were addressed

No or few missing data, all study participants had serum creatinine measurements available as well as height and weight information. All were asked about co-morbidity. The only potential missing data were on radiopacity/radiolucency. This issue is addressed in Table 1.

Case-control study—If applicable, explain how matching of cases and controls was addressed

Page 5, lines 123-125.
### Results

| Participants | 13* | (a) Report numbers of individuals at each stage of study—eg numbers potentially eligible, examined for eligibility, confirmed eligible, included in the study, completing follow-up, and analysed  

*Pages 4-5, lines 101-109 (methods section).*  

(b) Give reasons for non-participation at each stage  

*Pages 4-5, lines 101-109 (methods section).*  

(c) Consider use of a flow diagram (not done). |
|---|---|---|
| Descriptive data | 14* | (a) Give characteristics of study participants (eg demographic, clinical, social) and information on exposures and potential confounders  

*Table 1 and Pages 7-8, lines 170-182.*  

(b) Indicate number of participants with missing data for each variable of interest  

*Table 1, a few subjects had no information on whether stones were radiolucent or radioopaque.* |
| Outcome data | 15* | *Case-control study*—Report numbers in each exposure category, or summary measures of exposure  

*Pages 8-9, lines 183-219.* |
| Main results | 16 | (a) Give unadjusted estimates and, if applicable, confounder-adjusted estimates and their precision (eg, 95% confidence interval). Make clear which confounders were adjusted for and why they were included  

*Page 7, lines 164-166.* |
| Other analyses | 17 | Report other analyses done—eg analyses of subgroups and interactions, and sensitivity analyses  

*Pages 8-9, lines 201-214 and Table 3 (Results of same analysis for group of patients with radioopaque stones as for a group that included all subjects).* |

### Discussion

| Key results | 18 | Summarise key results with reference to study objectives  

*Pages 9, lines 222-227 and Table 3.* |
| Limitations | 19 | Discuss limitations of the study, taking into account sources of potential bias or imprecision. Discuss both direction and magnitude of any potential bias  

*Pages 12-13, lines 302-313.* |
| Interpretation | 20 | Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence  

*Page 13, lines 315-324.* |
| Generalisability | 21 | Discuss the generalisability (external validity) of the study results  

*Page 12, lines 300-302.* |

### Other information

| Funding | 22 | Give the source of funding and the role of the funders for the present study and, if applicable, for the original study on which the present article is based  

*Page 14, lines 355-356.* |
*Give information separately for cases and controls in case-control studies and, if applicable, for exposed and unexposed groups in cohort and cross-sectional studies.