Reviewer’s report

Title: Primary Care Solo Management Versus Nephrology Co-Management for Early Chronic Kidney Disease: A Retrospective Cross-sectional Analysis

Version: 3 Date: 15 June 2015

Reviewer: Chester H Fox

Reviewer’s report:

Major compulsory revisions:

This is more of a brief research article than it is an editorial. I do not think their data justifies it being an editorial.

Their data do not necessarily support their conclusions. It is possible that there is another explanation for what they found. In stage III CKD, there is clearly a benefit to co-management of disease versus treatment by primary care physician alone, but this benefit this appears is stage IV CKD. The authors do not note this discrepancy nor do they explain why it occurred.

One potential reason is that stage III CKD is poorly recognized in primary care offices and therefore not treated well. There is strong literature to support this and the author should cite it.

They could rerun their data looking at people who were diagnosed. The people were diagnosed could be defined by ICD-9 diagnoses from the problem list. Clearly those who are being managed by nephrologists have been diagnosed whereas those with abnormal eGFRs may not have been.

Lack of recognition of CKD stage III can potentially explain these data as well or better and the conclusions they derived.

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.