Reviewer's report

Title: Trends In The Histopathology Of Childhood Nephrotic Syndrome In Ibadan Nigeria: Preponderance Of Idiopathic Focal Segmental Glomerulosclerosis

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Reviewer: Manish D Sinha

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The study by Asinobi et al is an interesting paper, describing a relatively large series of children with nephrotic syndrome who underwent renal biopsy at the authors centre. Data presented is also compared with historical data from their own centre and with similar reports in the literature.

A total of 78 patients had successful biopsies done during the study period in children aged between 2½ and 16 years. In both pre-treatment biopsy era (1997-2001) and post-treatment biopsy era (2006-2013), focal segmental glomerulosclerosis (FSGS) predominated.

I have the following comments and concerns that need to be addressed:

1. Somewhat puzzling that the number of biopsies performed in the pre-treatment era are <50% of the number of biopsies in the post-treatment era. Please explain? If the policy was that all patients were biopsied before treatment there should be more in the earlier period as the authors also report an increase in the steroid responsive subjects.

2. What may be the reason for an increase in steroid unresponsive MCD subjects in the post treatment cohort 3. It is important that the authors give the reader some idea regarding number of subjects presenting with NS over the study periods. This would help understand some of the 'discrepancies' highlighted in earlier points.

4. What proportion of subjects get biopsied – the relative numbers seem smaller than expected over study periods. Is it therefore correct to extend the findings to all children with NS in Nigeria.

5. What may be the reason for the gender differences? Please comment.

6. Figure 1 (gender differences) should be removed.

Minor comments:

1. 'in no distant time' line 228/229 – please delete.

2. Suggest change 'we also think' to 'it may also be possible that…'

3. Change ESRD to ESKD to keep with widely accepted terminology