Reviewer's report

Title: Factors associated with residual urine volume preservation in patients undergoing hemodialysis for end-stage kidney disease, in Kinshasa Short title: residual urine volume in hemodialysis

Version: 0 Date: 05 Dec 2016

Reviewer: Yoshitsugu Obi

Reviewer's report:

Mokoli et al. examined the association of residual urine volume decline with clinical factors among incident HD patients in Congo. Although I acknowledge the importance of this topic, there are already quite a few similar papers including a recent paper by Obi et al. (J Am Soc Nephrol. 2016;27:3758-68) in addition to those cited in this manuscript. Indeed most of their findings have been identified elsewhere as described in the discussion section. In addition, the limited sample size of this study would not allow us to draw any reliable conclusions. The number of available patients in the preserved residual urine volume group at 6M and 12M after dialysis initiation was 60 and 30, respectively, where only a few covariates can be adjusted for in order to avoid overadjustment. The authors stated that they put only covariates that were statistically significant in univariate analysis into the multivariate logistic regressions, but this p-value based variable selection method is actually notorious for its high tendency to induce substantial bias into results. Furthermore, urine volume is a weak surrogate of residual kidney function because it is easily modifiable by diuretics. The lack of reliable method to estimate residual kidney function, as acknowledged by the authors, is another major limitation of this study. This manuscript also contains a lot of grammatical errors and awkward wordings, and hence, needs to be proofread by a professional English editing service. Overall, to my view, this manuscript is not qualified to be published in BMC Nephrology.

Minor: Authors should not make significant P values bolded in Tables. Beta coefficient and standard errors should be also removed from these tables because of the redundancy; they have the same information with ORs and 95% CIs.
Are the methods appropriate and well described?
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Yes

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