Author’s response to reviews

Title: Clinical course & Management of Childhood Nephrotic Syndrome in Germany: A large epidemiological ESPED study

Authors:

Malik Aydin (malik.aydin@uni-wh.de)
Ingo Franke (ifranke1@uni-bonn.de)
Lisa Kurylowicz (lisa.kurylowicz@ukbonn.de)
Corinna Elke Llamas Lopez (corinnalawrenz@gmx.de)
Rainer Ganschow (rainer.ganschow@ukbonn.de)
Michael J. Lentze (michael.lentze@ukbonn.de)
Mark Born (mark.born@ukbonn.de)

Version: 1 Date: 21 Dec 2018

Author’s response to reviews:

To the Editors of BMC Nephrology
Mrs. Helen Robertson and
Mr. Hayley Henderson

Date: December 18th 2018
Regarding: Revision of the manuscript BNEP-D-17-0648R1

Dear Mrs. Helen Robertson and Dear Mr. Hayley Henderson,
Dear Editorial Board Members,

Dear Reviewers,
We thank you very much for your time, dedication and constructive comments regarding our manuscript entitled “Clinical course & Management of Childhood Nephrotic Syndrome in Germany: A large epidemiological ESPED study” by Ingo Franke & Malik Aydin and colleagues to BMC Nephrology.

We are very excited to resubmit our re-revised manuscript and are very grateful for the reviewers’ constructive comments, who voluntarily spent their free time in reviewing our manuscript, which significantly improved the quality of our manuscript. We have included the appropriate changes in the revised manuscript, which are highlighted. We agree with the comments of the reviewer in most of the cases. Moreover, we have provided a more structured presentation of our data.

These (and other) implementations have certainly made the manuscript much stronger and interesting for the readers of the journal. In summary, we believe that we have adequately re-revised the manuscript and addressed the remaining issues raised by the reviewers. Enclosed, please, find a point-by-point response to the various comments of the reviewers and the revised version of the manuscript.

Unfortunately, Ingo Franke passed away before the resubmission of this article. We kindly request that he remain as an author on the article to acknowledge his contributions to the work and dedication to all of his works.

If any unresolved issues remain, please do not hesitate to let us know. We thank you very much for your time and considerations again.

On behalf of all authors,

With best wishes,

Dr. Malik Aydin

Dr. Ingo Franke (R.I.P.)
Dear Dr. Aydin,

Your manuscript "Clinical course & Management of Childhood Nephrotic Syndrome in Germany: A large epidemiological ESPED study" (BNEP-D-18-00608) has been assessed by our reviewers. They have raised a number of points which we believe would improve the manuscript and may allow a revised version to be published in BMC Nephrology.

Their reports, together with any other comments, are below. Please also take a moment to check our website at https://bnep.editorialmanager.com/ for any additional comments that were saved as attachments. Please note that as BMC Nephrology has a policy of open peer review, you will be able to see the names of the reviewers.

Thank you for your patience while we sought advice from a statistical reviewer – these comments along with those of reviewer 1 are shown below.

If you are able to fully address these points, we would encourage you to submit a revised manuscript to BMC Nephrology.

Once you have made the necessary corrections, please submit online at:

https://bnep.editorialmanager.com/

If you have forgotten your password, please use the 'Send Login Details' link on the login page at https://bnep.editorialmanager.com/. For security reasons, your password will be reset.
Please include a cover letter with a point-by-point response to the comments, describing any additional experiments that were carried out and including a detailed rebuttal of any criticisms or requested revisions that you disagreed with. Please also ensure that all changes to the manuscript are indicated in the text by high-lighting or using track changes.

Please also ensure that your revised manuscript conforms to the journal style, which can be found at the Submission Guidelines on the journal homepage.

A decision will be made once we have received your revised manuscript, which we expect by 17 Jan 2019.

Please note that you will not be able to add, remove, or change the order of authors once the editor has accepted your manuscript for publication. Any proposed changes to the authorship must be requested during peer-review, and adhere to our criteria for authorship as outlined in BioMed Central’s policies. To request a change in authorship, please download the ‘Request for change in authorship form’ which can be found here - http://www.biomedcentral.com/about/editorialpolicies#authorship. Please note that incomplete forms will be rejected. Your request will be taken into consideration by the editor, and you will be advised whether any changes will be permitted. Please be aware that we may investigate, or ask your institute to investigate, any unauthorized attempts to change authorship or discrepancies in authorship between the submitted and revised versions of your manuscript.

I look forward to receiving your revised manuscript and please do not hesitate to contact us if you have any questions.

Best wishes,

Helen Roberton, on behalf of

Hayley Henderson

BMC Nephrology

https://bmcnephrol.biomedcentral.com/
AUTHOR REPLY:

We thank you very much for the friendly, kind and constructive feedback. We have addressed all mentioned remarks to the best of our beliefs into the manuscript. After this critical revision, we are resubmitting a significantly improved paper. We have outlined all changes in detail below.

Reviewer reports:

Reviewer: 1 (Mrs. Professor Dr. Katarzyna Kilis-Pstrusinska)

Comments to the Author

Authors revised their manuscript. Some parts of the manuscript have been corrected or explained. In my opinion, the quality of the article is definitely higher. Authors answered all my questions. I don't have additional remarks.

AUTHOR REPLY:

We thank the Reviewer for her time, dedication and constructive comments regarding our manuscript.

Reviewer: 2 (Statistical reviewer assessment)

Comments to the Author

In this study, epidemiological evaluation of primary NS and secondary NS patients was performed. In this context, the duration of hospital stay and the complications seen in related individuals were examined. Comparisons were made in terms of hospitalization periods. The t-test and one-way ANOVA were used but the reasons for the use of the statistical methods used were not clearly specified. There are some errors in the representation of the results instead of the table with the representation of the graph only preferred.
If revisions are made after revision, the article can be accepted.

**AUTHOR REPLY:**

We thank the Reviewer for the feedback. We further added more statistical data into the manuscript. We hope

In the statistical method section, the T-tests expression should be changed to t-tests.

**AUTHOR REPLY:**

We thank the Reviewer for this advice. We changed the expression at appropriate place.

Which test was used in pairwise comparisons when there was a significant difference in the One-way ANOVA result?

**AUTHOR REPLY:**

We thank the Reviewer for this comment. We used the ordinary one-way-ANOVA with Holm-Sidak’s multiple comparison tests with a single pooled variance and the p value style was set up based on New England Journal of Medicine (0.12 (ns), 0.033 (*), 0.002 (**), <0.001 ()).

How was the use of parametric tests such as t-test and one-way ANOVA?

**AUTHOR REPLY:**

We thank the Reviewer for this feedback. Yes, both tests including t-test and one-way ANOVA were used for parametric tests. t-tests were used for two independent samples and a One-way ANOVA for more than 2 independent samples was used. The significance level was set at p < 0.05.

Were all the variables have normally distribution in each subgroup?

**AUTHOR REPLY:**

We thank the Reviewer for this comment. No, not all variables were normally distributed in each sub-group.
What is the statistical power of the study?

AUTHOR REPLY:

We thank the Reviewer for this question. Statistical power analysis tell us how high the statistical power is for a study design. They are either performed before the actual data collection to estimate how many subjects are needed to conduct the study, or after the actual data collection - but mostly when the study has not yielded significant results. In such a case, a power analysis can reveal how many participants would have been needed for the effect to have produced a significant result. Concerning on the fact, that our study is a retrospective data analysis of a high study sample number in consideration of multiple high significant results, we may write, that the statistical power despite a retrospective data set is quite presented.

The study population expression should be changed to study sample.

AUTHOR REPLY:

We thank the Reviewer for this comment. We changed the expression in to study sample.

When the result section is examined, it is seen that comparisons are made according to many criteria in terms of average length of stay.

AUTHOR REPLY:

We thank the Reviewer for this advice. Yes, multiple statistical comparisons in term of different clinical hypotheses were performed to analyze the study population in multiple interesting aspects.

In addition, the comparison of the average length of stay between age groups and infection types is only graphically expressed.

AUTHOR REPLY:

We thank the Reviewer for this feedback. But we have to disagree at this point. All figures are related to the main manuscript test and the average length of stay is in relation with the different age groups and also with infection types.
The expression in the total column (100.0%) can be removed in Table 2.

AUTHOR REPLY:

We thank the Reviewer for this comment. We deleted the percentage from the Table 2.