Reviewer’s report

Title: Quality of life after the initiation of dialysis or maximal conservative management in elderly patients: A longitudinal analysis of the Geriatric assessment in OLder patients starting Dialysis (GOLD) Study

Version: 2 Date: 27 Oct 2018

Reviewer: Susan Wong

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There continues to be several issues with the manuscript:

1) Patients who are transplant candidates and/or received a transplant should not be included in this analysis. The authors indicate that the aim of this study is to provide information on differences in trajectories in quality of life between patients treated with dialysis and those who opt for conservative care. They also indicate that this decision is most challenging for older patients with significant comorbidity in whom the benefits of dialysis are least certain. Therefore, it would seem that the population of interest would not be transplant candidates but consist of those for whom the option of dialysis would be as destination (and not bridging) therapy.

2) The presentation of results is uneven, and some conclusions are not supported by the results.

2a) The authors indicate that they repeated the primary analyses after stratifying by eGFR < vs. > 10, however they only present data for the subgroup of patients with eGFR <10.

2b) The authors describe that "EQ-D5 Index improved in the dialysis group" during follow-up but the p-value=0.1. They also restate this interpretation of results in the Conclusion.

2c) In the results, the authors state that "EQ-D5 Index declined significantly in the conservative group" and "overall self-rated quality of life conservative patients decreased" during follow-up, however in the Conclusion, the authors do not state these and instead describe "half of the conservative patients remain in a stable or better quality of life".

3) As stated above, the purpose of this study was to compare trajectories of quality of life between patients treated with dialysis and those opting for conservative care, however they perform an additional analysis (presented in Table 4) combining the two treatment groups that seems intended to examine factors associated with decline in quality of life. These analyses not only seem out of place in this manuscript but the design of the current study cannot support answering this specific research question.

4) How did the authors define "terminal non-renal condition", which was one of their exclusion criteria.
Are the methods appropriate and well described?
If not, please specify what is required in your comments to the authors.

Yes

Does the work include the necessary controls?
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