Author’s response to reviews

Title: Coronary Calcification as a predictor of Cardiovascular Mortality in advanced Chronic Kidney Disease: a prospective long-term follow-up study.

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Version: 1 Date: 11 Jan 2018

Author’s response to reviews:

Dear Editor,

Thanks very much for your letter and sending the comments of the reviewers of the manuscript “Coronary Calcification as a predictor of Cardiovascular Mortality in advanced Chronic Kidney Disease: a prospective long-term follow-up study”, manuscript BNEP-D-17-00526.

We have read carefully the reviewer’s comments. We agree and have accepted the suggestions. Herewith include our comments to each point:

1. “For some reason, the authors have used commas instead of decimals in all tables. This should be corrected”.
   We have corrected it and used decimals instead of commas in all tables of the paper.

2. “The study addresses a question that was recently addressed in a much larger cohort; therefore, authors should emphasize what their study adds incrementally. Perhaps, there are gaps in the prognostic value of CAD in dialysis patients. The authors should emphasize this with appropriate references”.
   Recently, Chen and cols. have published a very interesting paper concerning the prognostic value of
coronary calcifications in CKD patients. The size of the sample studied is very important, and the follow-up is similar to ours. However, in this study, only about 20% of the patients exhibited filtration rates under 30 ml/min, hemodialysis patients were excluded, and only global mortality was evaluated (authors explain the difficulties of assessing cardiovascular mortality). In consequence, the study does not answer adequately the question “Are coronary calcifications a good prognostic marker in advanced renal disease?”.

Thus, following the suggestions of the reviewer, we have tried to stress the value of our findings, emphasizing the unsolved gaps that there are in the prognostic value of CaC score in advanced CKD, particularly hemodialysis patients. For this purpose, we have changed the background and the discussion sections, and added new references. The changes are marked in red.

We are looking forward that these changes (and arguments) could fulfil your requirements and our paper can be finally published in BMC Nephrology.

Kind regards

Marta Cano-Megias