Reviewer’s report

Title: Treatment of Chronic Active Antibody-mediated Rejection in Renal Transplant Recipients – A single center retrospective study

Version: 0 Date: 03 Sep 2019

Reviewer: Hassan Argani

Reviewer's report:

The paper tries to explain differences of the graft and patient outcomes with regard of the 2 different treatment policy retrospectively. The following items as the major and minor considerations should be reevaluated before publishing:

The major considerations:

1- What is the conservative treatment? How did measure and how did monitor those? Which variables treated? By which drug or maneuver?

2- As the patients in the group 2 (who did not receive aggressive treatment) it was not randomly selected (it would be secondarily that the therapy would not be effective from the outset [for example cg score in this group is more than the treated group in the table 1 (p=0.052)], or proteinuria was heavier in the group, although without a high p value (probably because the small sample size?) it is not a desirable control group. In the other word your aggressive or conservative treatment may be influenced by the severity of the CABMR primarily.

3- What is the definition of graft loss? Going back to dialysis of doubling of serum cr?

4- Sample size is smaller than to reach a conclusive results.

5- Blood pressure, hyperlipidemia, and the drugs were used for, are very important forgotten issues.
The minor considerations:

1- In the aggressively treated group it is expected that 2 or more drugs have been used together. They should be clearly described and it will a confounding factor for clear conclusion.

2- In the table 2, 9th row: "mm &gt; 1" is mistake.

3- Only the barely name of immunosuppressive drugs in each group insufficient. The through levels of CNI are more important in each group.

4- Based on table 1, 3 patients in the conservative group received anti-CD25 therapy as induction therapy, why?

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