Reviewer's report

Title: Disease progression in Idiopathic Pulmonary Fibrosis with mild physiological impairment: Analysis from the Australian IPF Registry

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Reviewer: Spyros Papiris

Reviewer's report:

In the manuscript entitled "disease progression in IPF with mild physiological impairment: analysis from the Australian IPF registry", Helen Jo and co-workers assess the natural history of IPF patients with mild physiological impairment from the Australian IPF registry. 216 patients were classified as mild based on criteria such as FVC >80%, DLCO >405, cpi < 40 and GAP stage 1. Some of their interesting results are that there is only moderate agreement between criteria for mild physiological impairment, especially between FVC and DCLO, that patients with mild impairment had better survival and most importantly that there is no difference in the annual decline in FVC% predicted between mild and more severe groups and that the strongest predictor of outcome at 12 months is oxygen desaturation at 6MWT.

This is an interesting trial focusing on mild impairment patients. The study could have significant clinical implications. The authors are advised to ameliorate their work by addressing the following:

1) The main concern regards the fact that the authors have chosen as main DLCO value for mild impairment that of ≥40%. The authors of course provide also exploratory analysis for other criteria such as 50%, 35% and 30%. Taken into consideration the fact that the GAP index uses as cut off points the values of 55% for mild, 36-55% for moderate and less than 35% for severe disease the authors are kindly advised to reconsider the selection of the criteria for mild disease based on a DLCO ≥40%.

2) Furthermore in the discussion section when they conclude that their findings regarding the annual decline of FVC% between those patients with mild and more severe impairment mirror the results of the post hoc analysis of the pirfenidone and Nintedanib trials, they should comment on the fact that all pirfenidone and Nintedanib trials had excluded patients with FVC <50% and DLCO < 30-35%. Could the authors please provide some comments on that as well as on how many patients with FVC <50% and/or DLCO < 30-35% did the "more severe" group of the Australian IPF registry include?
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?
If not, please specify which controls are required in your comments to the authors.

Unable to assess

Are the conclusions drawn adequately supported by the data shown?
If not, please explain in your comments to the authors.

Yes

Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?
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I am able to assess the statistics

Quality of written English
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Acceptable

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