Reviewer’s report

Title: In-patient Tolvaptan use in SIADH: Care Audit, Therapy Observations and Outcomes Analysis

Version: 0 Date: 21 Nov 2016

Reviewer: Thierry Krummel

Reviewer’s report:

Nice work suitable for publication, however there are some revisions that are mandatory:

- Why was the tolvaptan discontinued when SNa was >125 and not when SNa was normalised or at least >130? Hyponatraemia between 125 and 130 may still be symptomatic and associated with morbidity and mortality. This should be explained in the methods.

- I have some problems with the indications for tolvaptan in the study: 24% of patients had hyponatraemia associated with drugs or infection. In this situation the SIADH resolves spontaneously in a few days, I don't think that tolvaptan is suitable in this situation. If patients are severely symptomatic they should be treated with hypertonic saline once as mentioned in the UK consensus in which one of the authors participated. Did some patients receive hypertonic saline?

- Line 195 it is written that 2 third of the patients achieved SNa >130 but on the figure 2 the median is always below 130, there is something wrong. Indeed if the median is below 130, more than 50% of patients are below 130.

- Line 202: fig 4a does not exist in the manuscript

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.

Yes

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?
If an additional statistical review is recommended, please specify what aspects require further assessment in your comments to the editors.

I am able to assess the statistics

Quality of written English
Please indicate the quality of language in the manuscript:

Acceptable

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