

Format for ANSWERING REVIEWERS

October 1st, 2014



Dear Editor,

Title: Increasing the use of biocompatible, glucose-free Peritoneal Dialysis solutions

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Name of Journal: World Journal of Nephrology

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Please find enclosed the edited manuscript in Word format (file name: 11962-edited&revised.docx).

The manuscript has been improved according to the suggestions of reviewers:

- 1 A running title has been added: Biocompatible, glucose-free PD solutions
2. Each author's contribution have been stated
3. A cover tip has been added.

Core tip: There is increasing evidence of benefit for using biocompatible and non glucose based PD fluids. However, cost remains an impediment and perhaps there are selected groups of patients where the cost can be justified. We suggest that biocompatible solutions should be considered for patients with residual renal function and / or expected to remain on PD for a long period. They are particularly helpful for patients with drain-in pains. The targeting of diabetic patients for non-glucose solutions is intriguing given the recent

IMPENDIA/EDEN study although vigilance is required to minimize unaware hypoglycemia. It remains to be seen if PD nephrologists are willing to take the same leap of faith that our HD colleagues took when they moved from Acetate-based HD solutions to Bicarbonate dialysate. It is possible that economies of scale will reduce the cost of the biocompatible solutions if we use them more frequently.

4. Revision has been made according to the suggestions of the reviewer

(1). Sub-headings have been added (6 sub-headings)

(2) Referencing superscript style has been changed as per journal requirement

(3) Abbreviations have been explained and clarified

(4) The meaning of (x4) has been clarified

(5) The meaning of the contents of table 2 has been explained

(6) The axis of figure 1 have been labeled

(7) Figure 1 has been explained further – the title has been expanded and also an extra text box has been added:

“Continuous Glucose Monitoring demonstrates the merits and risk of using non-glucose based PD solutions (Extraneal). On one hand the overnight Extraneal dwell (from 22:00 to 06:00 hours the next day) controlled the blood sugar effectively in comparison to the glucose based PD fluid dwell (from 06:00 till 22:00 hours the same day). On the other hand Extraneal is putting the patient at risk of hypoglycemia (between 05:00 and 0800 hours). It is noteworthy that diabetic end stage renal disease patients have an increase incidence of hypoglycemia unawareness.”

5. A list of abbreviations has been added

6. References have been revised so that all the author names are included as well as PMID & DOI tags.have been added.

Thank you again for considering our manuscript for publication in your journal.

Sincerely yours,

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