

## **Reviewer 1**

Review Date: 2022-08-12 18:56

Specific Comments to Authors: I would like to congratulate the authors on being able to collect this very significant data from all these centers and with excellent response rates, which are much higher than usual. The authors provide us with important information regarding the status of renal transplantation in Turkey, especially having to do with living donation. Could the authors please respond to the following questions/comments?

- 1) Do the authors have any data regarding the donors: epidemiological, donor follow-up, complications, etc.?

We would like to thank the reviewer for this very important question.

The donor follow-up and complications were reported from the perspective of donor nephrectomy surgical technique. Postoperative atelectasis, bleeding requiring blood transfusion, wound infection, hernia formation, chile leak, postoperative ileus, deep venous thrombosis, pneumonia, and urinary retention rates were given at the results section under the “Complications of donor Nephrectomy surgeries” title. Additionally, we added Figure 3 to give the reader an overview of all the complications with percentages reported.

- 2) Do the authors have any data regarding the function of the renal grafts, for example what was the % of delayed graft function?

Many thanks for this question. This study focused on the details of donor nephrectomy techniques and practices in Turkey. Analyses were carried out in terms of technical variations in donor surgery, surgical team set-up and training as well as donor complications. However, the recipient outcomes and follow-up were not included in this study. We are aiming to fill this part of the literature with another nationwide clinical study.

## **Reviewer 2**

Review Date: 2022-08-18 10:28

Specific Comments to Authors: In this study, the authors surveyed current practices of live donor nephrectomy (LDN) in Turkish transplant centers in year 2019. Questionnaire was sent to all 72 transplant centers in May 2022 and again in September. All responded. Five centers were excluded as no LDN were performed. They concluded that Turkish transplant centers performed LDN surgeries successfully through various techniques. Centers implementing minimally invasive techniques had a relatively higher number of live donor kidney transplants in 2019. This is an important study, whose results will be of interest to research community throughout the world in general and in Turkey, in particular. However, the paper needs revision. There are many points which need to be addressed, as under-

Major points:

- 1- There is some discrepancy regarding COVID-19 and the study year. The paper says it analyzed the practice of live kidney donation in 2019, whereas the chief impact of COVID-19 was seen in year 2020. As such, the study duration encompasses pre-COVID-19 era and not COVID-19 era. Please reconcile this. Or remove the COVID-19 part from the manuscript.

We would like to thank the reviewer for this very important comment. We removed the part of the article mentioning COVID-19 upon consideration within our research group. As the reviewer emphasizes, during our study period the main impact of COVID-19 was not observed yet.

- 2- Please provide key words from MeSH after abstract.

We added the relevant MeSH terms.

- 3- In abstract: Give IQR or min-max values along with median values.

Thanks for noticing this. The IQR and min-max values were added to the abstract which made it more clear and informative.

- 4- Give percentage after 28 for living kidney transplants.

The percentage was added.

- 5- Main paper: Add et al. to Ratner name in Introduction.

Thanks for this correction. The "et al." was missing and we added this as per your recommendation.

- 6- Give year after September in Methods.

The year 2020 was given in Methods section after September.

- 7- Please also give date when all questionnaire were received?

All the questionnaires were received on December 2020. We added this information to the materials and methods section.

- 8- What was the closing date of data collection?

The data collection was closed after the arrival of the last questionnaire, this information was added to the materials and methods section. We would like to thank the reviewer for identifying this missing information in our manuscript.

- 9- Use standardized approach to the use of abbreviations. Once abbreviated, then only abbreviation should be used. E.g. LDN, but in paper, full term is again used.

We corrected the sentences which had a repetition of the full term for “Live Donor Nephrectomy”. Additionally, we checked and standardized the abbreviations within the text.

- 10- Whether residents who have completed the training are allowed to perform transplant surgeries without qualifying examination?

A scientific committee which consist of experienced transplant surgeons, nephrologists, transplant coordinators and hepatologists evaluate the surgical trainee in terms of scientific and surgical qualifications. If the requirements are satisfied, then a certificate is given to the surgeon as a transplant surgeon. This information was added to the discussion section where the study results regarding training and team set-up were addressed.

- 11- Results of main paper: Give IQR or minimum-maximum of no. of transplants (as given in Table 1) and all other data displayed as central tendency.

The data display was organized according to reviewers’ advice.

- 12- In Table 1, per center was written as percenter in 4th row.

The 4<sup>th</sup> row was corrected in Table 1.

- 13- Add “ and composition and training of the surgical team” in the caption of Table 1.

Definition was added to the caption in Table 1.

14- “The average blood loss was 0-100 ml during” should be changed to “The average blood loss ranged between 0-100 ml during” and so on.

Sentence was corrected as per recommendations.

15- Figure 2, donor nephrectomy types labels should be coloured or otherwise highlighted. Currently, they are undistinguishable.

We have colored the figure.

16- Rates of hernia should be moved down into the subheading of complications and should not be in variations of techniques subheading.

We moved this section to the complications subheading.

17- Complete the sentence “performing less than live donor kidney transplants (10).” in discussion.

The sentence was completed as per recommendations.

18- Determiner/determiners should be changed to determinants.

We have corrected the spelling error.

19- A few minor English language mistakes should be corrected throughout the manuscript.

We corrected the English mistakes within the manuscript.