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CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[ ] Grade A (Excellent)	[ ] Grade A: Priority Publishing	Google Search:	[ ] Accept
[ ] Grade B (Very good)	[Y] Grade B: minor language polishing	[ ] Existed	[ ] High priority for publication
[ ] Grade C (Good)	[ ] Grade C: a great deal of language polishing	[ ] No records	[ ]Rejection
[Y] Grade D (Fair)	[ ] Grade D: rejected	BPG Search:	[ ] Minor revision
[ ] Grade E (Poor)		[ ] Existed	[Y] Major revision
		[ ] No records	

COMMENTS TO AUTHORS

This meta-analysis article presents an important result in this research area. Some comments might help to clarify the study description and its presentation. General comments: 1. Quality assessment for those studies included. Although the authors mentioned in the text about "The overall quality of the studies included in this meta-analysis was good, since low heterogeneity was observed according Q value for observational (18.13) and interventional studies (2.86) " (Page 9), the quality of included studies involves bias (selection bias, recall bias, etc.), confounding and heterogeneity. Low heterogeneity does not assure high quality of those included studies. For example, lack of baseline vitamin D measurement, participant source or age information unknown all might potentially give spurious findings. Additional to exclusion /inclusion criteria, it will be good to provide some quality information about potential bias and confounding for those studies. 2. It will be important to provide the numbers of SVR for both above and below the level of vitamin D cutoff point in Table 2 as those intervention studies. I recalculated some ORs from some studies. The numbers are not matched exactly. The difference should be due to the different numbers of SVR in each vitamin D level group. Those numbers are important for audiences. 3. The session of Data Analysis is somewhat repeated and confusing. The heterogeneity is tested using the Cochran-Q heterogeneity test and measured by Chi-squared test and I2 test. Basically, I2 is a statistic not a test, and Chi-squared test statistic should be the same as the Cochran-Q heterogeneity test statistic. 4. The Data Analysis mentions to analyze data using random effect models when there is a significant heterogeneity among studies. Based on Figures 1 and 2, there is no significant heterogeneity (p-values 0.2395 and 0.3799). The authors performed random effect models analysis anyway. One certainly can use random effect modeling for this study regardless its heterogeneity. However, it has to be

consistent with its pre-specific analysis methods. Specific comments: 1. Abstract: please put the full name of HPLC for the first time appeared in the article. 2. Page 8, Results: It is not clear where the p-value = 0.02 comes from for those observational studies. Figure 1 indicates p=0.3799. Similarly, in Page 9, Q value for observational (18.13). Figure 1 indicates Q=7.49. 3. Page 9, what is OD? 4. For Reference 30, the author name should be Reiberger not Reiberg. The pages of this reference should be 1191A-2A.