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OPEN PEER REVIEW

Impact of Ultrafiltration Profiling Compared to Conventional Methods on Blood Pressure Regulation Among Hemodialysis Patients

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About this report

This open peer review (OPR) report shows the public comments made on this article during peer review, by the reviewers, the associate editor and the editor-in-chief, for every revision round, together with the authors' replies. Comments appear only with the consent of the people who wrote them. Reviewers who chose to sign their report are named; the others are shown as "Referee". Comments are edited for language only, and confidential remarks to the editors are not included.

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1 Original submission

2 comments · 2 Aug 2023 – 20 Aug 2023

Alireza Soleymanitabar Reviewer

MINOR REVISION 2 Aug 2023

Dear authors
I really appreciate your endeavors to run this study and write this manuscript.
Here are some comments to help you enrich your manuscript:
1. Please mention that this study is a clinical trial and its setting (open-label or blinded, randomized or not) in the title.
2. Please summarize the objective part.
3. Since all clinical trials MUST be registered before they start, please provide the IRCT code in the methods.
4. In the methods, "not having cardiovascular disease" is an exclusion criterion itself. Please do not mention it in the inclusion criteria.
5. Please write the accurate p-values and do not write "P<0.005".

Associate Editor

MINOR REVISION 20 Aug 2023

Minor Revision

2

Revision 1

AUTHORS' RESPONSE TO REVIEWERS

Authors' reply to reviewers

The next pages contain the authors' point-by-point reply to the comments of this revision round, as submitted with the revised manuscript. It is published as the authors wrote it.

:Q: type of study

A: non randomized clinical trial, single blind study

:Q2: summarize objectives

:A2

One of the nursing care interventions that can be employed by dialysis nurses to prevent blood pressure complications during dialysis is the adjustment of the ultrafiltration profile(13, 14). Lowering the ultrafiltration rate during the later stages of dialysis can assist in preventing these complications(15, 16).In some studies, the adjustment of the ultrafiltration profile, along with the sodium profile, has shown positive results in maintaining blood pressure balance for hemodialysis patients experiencing hypotension during the procedure(17). However, the results of a crossover clinical trial indicated that applying the ultrafiltration profile in a linear manner with a negative slope did not significantly differ from the usual mode in controlling blood pressure increase during hemodialysis(18). Given the limitations of previous studies in this area and the lack of investigation into the shape of profiles with negative slopes in ultrafiltration control for managing blood pressure increase in these patients, which can easily be performed and does not entail the cost and side effects of antihypertensive medications, the present study was conducted with the aim of determining the impact of adjusting the ultrafiltration profile on blood pressure control in hemodialysis patients.

:Q3: IRCT code

A:

IRCT20220206053954N1

2 Revision 1

1 comment · 2 Nov 2023

Associate Editor

MAJOR REVISION 2 Nov 2023

Your manuscript has now been assessed and a major revision is needed.
We invite you to revise your paper. When your revision is ready, please submit the updated manuscript and a point-to-point response if applicable.

Kind regards,
Mohammad Heiat

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Revision 2

AUTHORS' RESPONSE TO REVIEWERS

Authors' reply to reviewers

The next pages contain the authors' point-by-point reply to the comments of this revision round, as submitted with the revised manuscript. It is published as the authors wrote it.

Reply to reviewers

Question one: didn not provide the diagram 1

Answer: I input the mentioned diagram that missed in my last edition with yellow highlight at page 7

Question two: Mismatch of table numbers and table titles mentioned in the text

Answer: the titles edit and highlight with yellow color

3 Revision 2

1 comment · 25 Apr 2024

Associate Editor

ACCEPT 25 Apr 2024

Accept