Nephro-Urology Monthly
Volume 16 · Issue 3 · e145972

OPEN PEER REVIEW

Does The Serum Zinc Level Affect the Quality of Life in Dialysis Patients? A Report from Iran

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SUBMITTED	REVISED	ACCEPTED	DOI
19 Feb 2024	15 May 2024	7 Jun 2024	10.5812/numonthly-145972

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

0 comments

No public comments in this round.

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.

May 8, 2024

Re: Revision ID 145972

Dear editorial board of Nephro-Urology Monthly.
We would like to appreciate the constructive point raised by reviewers.
All comments are answered one by one in bellow.

Reviewer 1 comments:
1.There are many problems in the selection of the study sample, including patients in different age groups, the same duration of dialysis is not taken into account, and again, the number of weekly sessions is defined, and in other words, the weekly dialysis hours are not matched.
Reply: some of above is unavoidable like different age sample because in a single center there are wide age group patients. However, we restricted age range in adult ages. In addition, it is applying about duration of dialysis.
About “not matched weekly dialysis”, as you know we schedule time of dialysis according to patients well being and some variables are determinants of dialysis efficacy. One patient may need 8 hours hemodialysis but another needs 12 hours, for equal symptom free situation and acceptable laboratory data. On the other hand, time of dialysis is regulated by uremic syndrome symptoms, laboratory data, patients well-being, urine volume and so on. Therefore, in this study time of dialysis is not a variable that should be matched in the groups.

2_pcs and sf criteria were not attached, which probably has search capability, but the definition of quality of life is different in different age groups, so choosing one type of questionnaire for all patients is problematic.
Reply: thanks for your sharp opinion. This questionnaire is approved for ESRD patients and validate for quality-of-life assessments in hemodialysis and peritoneal dialysis. Hence, we should use this for our assessments.

3_The causes of ESRD have an effect on the quality of life. In this article, the general causes of ESRD are mentioned.
Replies: it is very valuable opinion but after the patient loss her/his kidney, many of common signs and symptoms are similar. For example, if the patient has immune mediated kidney disease, he/she has subsided immune disease and uremia is dominant disease and it is semi-similar between them.

Reviewer 2:
the manuscript could scheduled for publication.
Reply: thanks for your pleasant opinion.

Warm regard,

2 Revision 1

1 comment · 31 May 2024

Associate Editor

ACCEPT 31 May 2024

Accept