

Review of: "Chronic kidney disease and pregnancy outcomes"

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Potential competing interests: The author(s) declared that no potential competing interests exist.

The Authors report pregnancy outcome of 84 patients with chronic kidney disease.

Points to be addressed:

- Had some of the patients had a diagnosis of renal disease done during pregnancy?
- The mean values of Serum Creatinine are low and the SD is high, showing that some of the patients in each series may have had an increased SCr. It should be pointed out how many patients were over the normal level and how much.
- It should be shown how the diagnosis of hypertensive nephrosclerosis was done, since in young patients this seems quite an unusual diagnosis: was a renal biopsy done?
- Patients with tubulointerstitial nephritis had low levels of SCr and of proteinuria: how was the diagnosis done?
- Which was the activity of lupus (SLEDAI score) and what class of lupus nephritis did these patients have? How long have they been in remission before pregnancy?
- Had diabetic nephropathy been diagnosed by a renal biopsy?
- About 15 patients had a proteinuria higher than 3 g/day. What moment is that datum referring to? Before or during pregnancy and at which week? If before pregnancy, one should ask why these pregnancies were allowed. Particularly, the outcome of pregnancy of this group of patients should be reported.
- The sentence "Serum creatinine of $>77 \mu\text{mol/l}$ (0.87 mg/dl) should be considered upper limit for pregnancy" is quoted in a way that means that no pregnancy should be allowed over that SCr value, while in the original paper it means that among pregnant patients with normal renal function the upper limit of SCr found was $77 \mu\text{mol/l}$.

The paper does not add any knowledge to that already present in the literature and the case series is quite small. Thus I don't consider it suitable for publication.

