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Journal Name:	**British Journal of Medicine and MedicalResearch**
Manuscript Number:	**Ms_BJMMR_32156**
Title of the Manuscript:	**Screening for Fabry Disease among Dialysis Patients in Brazil: Findings from the First 18 months of a Nationwide Study**
Type of the Article	**Original Research Article**

General guideline for Peer Review process:

This journal's peer review policy states that **NO** manuscript should be rejected only on the basis of '**lack of Novelty**', provided the manuscript is scientifically robust and technically sound.
To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

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PART 1: Review Comments

	Reviewer's comment	**Author's comment** *(if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)*
Compulsory REVISION comments		
Minor REVISION comments	Introduction: - please add "abdominal pain" in description of multiorgan involvement in FD - please refer to the importance of early diagnosis among the advantages of FD screening in high-risk populations - please add a better description of "renal variant" - please add this citation regarding FD in childhood to reference section:Sestito S, Ceravolo F, Concolino D. Anderson-Fabry disease in children. Curr Pharm Des. 2013;19(33):6037-45 - please add this citation regardingintra- familial variability of FD to reference section:Rigoldi M, Concolino D, Morrone A, Pieruzzi F, Ravaglia R, Furlan F, Santus F, Strisciuglio P, Torti G, Parini R.Intrafamilial phenotypic variability in four families with Anderson-Fabry disease.Clin Genet. 2014 Sep;86(3):258-63 Methodology: 2.1 Study population: - please specify that underlying causes of CKD which might be present in patients enrolled in the study were different from those considered as exclusion criteria 2.3 Ethics, consent and permissions	

	- in Fig.1 what do the number in correspondence of the centers stand for? 2.3 Screening strategy - please specify who had validated the clinical questionnaires applied to the patients - please specify what the acronyms MPC and MGR stand for. 2.3.2 Data analysis - please complete the sentence :" Statistical analysis by frequency distribution, measures of central tendency, dispersion, and the chi-square test" - please explain better what guided the choice of combinations created to distinguish patients in FD-suspected, FD-non suspected and analysis (i.e. the frequency of signs and symptoms described in literature, natural history of FD, etc.) Results 3.1 Patients demographics - Please specify that 2847 are FD-negatives among FD-suspected patients 3.2 GLA gene mutation analysis - Please complete the sentence :"no mutation was significantlyprevalent" with " in patients with cornea verticillate" 3.3 Frequency of FD symptoms - Please specify that FD-negatives are among FD-suspected patients Discussion - Please make a clearer description of genotype-phenotype correlation regarding cerebrovascular disease in FD	

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Optional/Generalcomments	**The authors' analysed 25,223 dialysis patients from 188 Brazilian dialysis centers, developing an algorithm which allowed to reduce significantly the number of dialysis patients tested, and founding a prevalence of FD of 0,4%, in line with previous reports. In discussion section authors focus on clinical and demographics features and a precise genotype-phenotype correlation regarding GLA mutations found in positive patients. They conclude underlying the importance of the algorithm developed in order to identify FD patients among large numbers of dialysis patients.**	

Reviewer Details:

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