

Reviewer's Comment:

- 1) Do you know what type, i.e. MPGN, Membranous, FSGS, ?HIV?
- 2) I would conduct an ANVOA test to report the differences in frequency among cases and controls. Include the p value.
- 3) While you did enroll patients, this study is not prospective in its design because you already knew the outcome (ESRD). You therefore cannot determine incident ESRD. All you can say is whether there is an association or not. You can perhaps say that the validation of this association may facilitate further research in inflammation and offer therapeutic incites towards ESRD.
- 4) In Figure 1 please Include the number of patients in each of these subgroups.
- 5) In Table 2 please include OR for row Genotype/Alele G.
- 6) Table 3 is very confusing. Why are there 3 columns of p values.? Please conduct ANOVA and include one p value for each of these predictors.
- 7) In the discussion, I would first say that the frequency of Genotype polymorphisms was higher among the ESRD patient population.
- 8) In the discussion, please elaborate why age is such a significant predictor to patients with ESRD and TNF-Alpha polymorphism.
- 9) In the discussion, be careful correlation is not the same as saying associated. Correlations are reported with a correlation coefficient.
- 10) In a separate paragraph include limitations. Please include the typical limitations with case control studies including sampling bias, low sample size and unmeasured confounding.
- 11) Conclusions should be more robust. Why is it important and what are the future implications?

Reviewer Details:

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