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Title	Estimating patient-borne water and electricity costs in home hemodialysis by simulating common dialysis prescriptions
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Authors	PhD, Robert P. Paul MD
Reviewer 1	Macaulay Onuigbo MD
Institution	Department of Nephrology, Mayo Clinic Health System, Rochester, MN
General comments	A well-conceived, well-executed and well-written paper that for the first time, addresses a neglected aspect
(author response in bold)	of HHD paradigm.
	We thank the reviewer for the support given to our manuscript.
Reviewer 2	Paul Komenda MD
Institution	Department of Nephrology, St. Boniface General Hospital, Winnipeg, Man.
General comments (author response in bold)	Home Hemodialysis is an emerging modality for kidney failure care that has many purported advantages. While existing costing studies generally show lower payor borne costs than its in-centre counterpart, patient related costs incurred as a result of performing hemodialysis in the home are not well described in the literature. This is a well thought out, well executed study in describing the patient borne costs of utilities with this modality. It has significant policy implications for renal programs considering starting or expanding home hemodialysis programs as these utility costs could be a substantial barrier to entry for many patients wanting to perform this modality.
	The manuscript is well written and conclusions are appropriate. The methodology is simple, elegant, and well explained. The descriptive outcomes are clear. I have a few comments/suggestions that may help to strengthen the overall messaging:
	1. Have the authors considered publishing an online appendix calculator that would aid programs in calculating reimbursement for their patients where programs could enter their local power and water utility rates?
	Yes, we have thought about creating an online calculator, but, unfortunately, we do not have the necessary resources at the moment. Having said that, if CMAJ Open would consider hosting this calculator as an attachment to the manuscript, we would certainly be happy to provide the Excel formula to import.
	2. Within the Canadian context, the Manitoba Renal Program I believe is already reimbursing patients for their utility costs.
	This has now been explicitly referred to in the text of the Discussion (page 10).
	 The comment that the Bellco/Gambro combination is relatively common in Canadian programs may be correct, however the NxStage system is increasingly gathering momentum within several Canadian provinces that will substantially change the equation in terms of water consumption. While this system may not deliver the same clearances as conventional equipment, this should be acknowledged by the authors and commented on in some form. We acknowledge that NxStage has been introduced in Canada and may make up greater market share in the coming years. At present however, it makes up a very small proportion of the total Canadian home hemodialysis machines in active service. The formula derived in the current
	Canadian home hemodialysis machines in active service. The formula derived in the current manuscript is not thought to be relevant for the NxStage dialysis machines. This has now been specifically addressed in the text of the Discussion as the reviewer suggests (page 12).