

## Peer Review File

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### Review Comments

1. The challenges for delivering KRT in the COVID-19 era made the patients and healthcare providers inevitably reconsider the choice of treatment modality and choose home PD as their preferred treatment therapy for its lower risks of acquiring COVID-19. Does home PD put forward higher requirements for medical staff?

**Response:** Thank you for the question. During COVID-19, the experience of successfully incorporating the online consultations and remote monitoring in managing of PD patients were reported. In our view, offering adequate education, engaging patients and family in the remote monitoring, and ensuring the safety of home PD in the long-term will be the main challenges for the medical staff. And these challenges will put forward higher requirements for medical staff.

2. Data from Britain, the United States and Canada found that the incidence rate of COVID-19 in home PD patients was 2~3 times lower than that in patients with central haemodialysis. At a dialysis center in Italy, the all-cause hospitalization rate of home PD patients is lower than that of hemodialysis patients. Will other risks of home PD patients increase?

**Response:** We appreciate the reviewer's question. COVID-19 and its prevention and control measures have promoted the transition of KRT care delivery at home with close monitoring. From what we learn from the practice and the literature, the home PD with an adequate monitoring during the COVID-19 are feasible, safe, flexible, and have many other advantages. For a long-term, however, the optimized monitoring plan, potential risks, and long-term outcomes have not been studied. In this case, it is hard to tell other risks of home PD will increase.

3. For PD patients with high concentration of COD, we suggest that we should strengthen the disinfection measures in the home caseload were recommended. For areas with high COVID-19 cases, how to determine the frequency of household environmental disinfection?

**Response:** Thank you for the question. The recommendation is based on the expert consensus from the Chinese Society of Pediatric Nephrology and Chinese Medical Doctor Association of Pediatric Nephrology<sup>[1]</sup>. In this guideline, PD treatment room should be cleaned and disinfected once daily. To clarify the frequency of disinfection measurement, we revised "*x, for home PD patients,*

*disinfection for the home environment once daily” in Prevention of COVID-1 among patients on KRT, page 6.*

[1]Shen Q, Wang M, Che R, et al. Consensus recommendations for the care of children receiving chronic dialysis in association with the COVID-19 epidemic[J]. *Pediatr Nephrol.* 2020.[Epub ahead of print]. doi:10.1007/s00467-020-04555-x

4. A global survey of healthcare providers found that only 14% of healthcare providers continued face-to-face consultations. Compared with face-to-face communication, can telemedicine achieve satisfactory therapeutic effect?

**Response:** We appreciate the reviewer’s question. According to the studies reporting the experience of using telehealth in managing patients during the COVID-19 era, the telemedicine generally worked well with very few or without adverse patient events. However, since empirical studies comparing the influence of telemedicine VS traditional on healthcare system and patients’ outcome are lacking, delivery of KRT through telehealth needs to be further tested.

5. For patients on home dialysis and transplantations, it is recommended that non-urgent hospital visits should be rescheduled and non-essential procedures should be avoided during the pandemic. But for emergency home dialysis and transplant patients, how to optimize the treatment process to avoid COVID-19 infection?

**Response:** We appreciate the referee’s suggestion. With emergency home dialysis and transplant patients where remote assistance could not be offered safely and ethically, patients are recommended to visit the hospital with proper personal protective equipment. The patients generally need to screen for COVID-19 according to the requirements of local government and facilities. However, optimizing the treatment process for dialysis and transplant patients admission was specifically discussed.

6. During COVID-19, a multidisciplinary team enhanced the self-management ability of young people with chronic diseases and their families through virtual counseling. How to enhance the self-management ability of elderly patients with difficulties in using telemedicine?

**Response:** We appreciate the referee’s question. With elderly experiencing deterioration in physical and psychological conditions, it is suggested that assisted peritoneal dialysis with telehealth support should be feasible for their KRT access during COVID-19 era<sup>[1]</sup>.

Harmanakaya NO, H. K. Peritoneal Dialysis in the Elderly: Modality of Choice During COVID-19 Pandemic[J]. *AJBSR.* 2020, 9(3). doi:10.34297/AJBSR.2020.09.001397.