

Letter to Editor

The Relationship Between Serum Vitamin D3 Levels and Recurrent Urinary Tract Infection in Children Aged 2-15 Years



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Dear Dr. Masoumeh Mohkam

I hope this message finds you in good health. I would like to express my sincere appreciation for your continued efforts to maintain the scientific quality and integrity of the journal and for your dedication to advancing pediatric nephrology research and academic discourse.

I read with great interest the article entitled "The Relationship Between Serum Vitamin D3 Levels and Recurrent Urinary Tract Infection in Children." This study addresses an important clinical question and contributes meaningfully to the existing literature on pediatric urinary tract infections and vitamin D status.

However, I would like to raise two methodological points that may require clarification.

First, there appears to be an inconsistency in the description of the study design. The abstract describes the research as a cross-sectional study, whereas the methods section indicates a comparison between children with urinary tract infection and a control group, which corresponds more closely to a case-control design. These study designs differ substantially in participant selection and inferential scope; therefore, consistent and accurate reporting of the study design is essential for proper interpretation of the findings and scientific transparency.

Second, the conclusion section appears to extend beyond the evidence of an observational study by suggesting vitamin D supplementation as a preventive strategy for urinary tract infection. Although observational studies are valuable for identifying associations and generating hypotheses, recommendations regarding prevention or treatment typically require evidence derived from interventional or randomized clinical trials. Drawing preventive or therapeutic conclusions from correlational data may exceed the methodological limitations of the study design. Clarifying this distinction would strengthen the scientific rigor and interpretability of the manuscript.

In summary, I respectfully suggest that clarifying the study design in the abstract and tempering preventive claims in the conclusion would enhance methodological precision and scientific transparency. Such revisions would contribute to a more accurate understanding of the evidence and support the ongoing advancement of high-quality research in pediatric nephrology.

Thank you for considering these comments. I hope they are received in the spirit of constructive scientific dialogue and contribute to the continued improvement of scholarly communication in this field [1].



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Sincerely,

Faezeh Javadi Larijani

Pediatric Nephrologist, Pediatric Chronic Kidney Disease Research Center, Tehran University of Medical Sciences, Tehran, Iran [2].

Dear Dr. Larijani

We thank you for your attention to our article titled "The Relationship between Serum Vitamin D3 Levels and Recurrent Urinary Tract Infection in Children."

Regarding the first part of your comment, we admit the inadvertent error in describing the study design. Our study was conducted as a case-control design, and this should be corrected in the Abstract and Methods sections.

Regarding the second part of your comment, we partially agree. The phrasing in the conclusion section of the abstract may lead to misunderstandings. This error is not repeated in the main Conclusion section in the full text. We recommend revising the conclusion of the abstract to: "Vitamin D deficiency is correlated with urinary tract infection (UTI) in children, and using supplements may be a low-risk way to prevent UTI."

We appreciate your valuable comment, interest, and careful review [3].

Dr. Atrin Oroojeni

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References

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