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	Peripheral arterial disease in Ontario First Nations people with diabetes: a
Title	longitudinal population-based cohort study
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Reviewer 1	Name withheld
Institution General comments (author response in bold)	Withheld [Review withheld]  Thank you for your thoughtful comments on our manuscript. We have addressed each of them and revised the manuscript, which we are submitting here.
Reviewer 2	Oren Steinmetz
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General comments (author response in bold)	1) In Methods, for comparison of survival, was the comparison to all other residents of Ontario or all other diabetic residents of Ontario? Please clarify this in the methods.  2) Is a comparison of survival of first nations people with amputation to other Ontario residents valid? It is well established that individuals with PVD and critical limb ischemia (bypass, gangrene, amputation etc.) have lower life expectancy than individuals without critical limb ischemia independent of whether or not they have diabetes. The outcome is expected. The comparison group should be to other Ontario residents with diabetes and amputation.  3) Was there a relationship between distance from urban center and amputation rates? Was this controlled for? Vascular surgery is increasingly being centralized to high volume centers. This is a national trend in Canada and may present a problem if there is a problem with access to these centers from remote communities. Did you do a comparison with non-First Nation diabetics living in remote communities or regions? At least some of this effect may be related to access to care due to location. Please comment.  4) A primary factor in the failure of revascularization that will lead to limb loss is access to wound care and rehabilitation services. This has been a very big challenge in our province since the same level of service is not available in remote communities. Please comment. Much of this type of care could be provided by nurses and other health care professionals in the communities and does not require prolonged stay in vascular centers however these services are currently lacking.  Thank you for your thoughtful comments on our manuscript. We have addressed each of them and revised the manuscript, which we are submitting here.