



PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 40321

Title: An optimal immunosuppressor induces stable gut microbiota after liver transplantation

Reviewer’s code: 00761439

Reviewer’s country: Greece

Science editor: Xue-Jiao Wang

Date sent for review: 2018-06-21

Date reviewed: 2018-07-02

Review time: 11 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input checked="" type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good		<input checked="" type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	(General priority)	Peer-reviewer’s expertise on the topic of the manuscript:
<input type="checkbox"/> Grade E: Do not publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Minor revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Major revision	<input checked="" type="checkbox"/> General
		<input type="checkbox"/> Rejection	<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

This paper studied the influence of different dosages of Tacrolimus (FK506) on gut microbiota after liver transplantation in rats. The researchers presented interesting data on the optimal dosage of FK506 that induces immunosuppression along with stability of



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7901 Stoneridge Drive, Suite 501,
Pleasanton, CA 94588, USA
Telephone: +1-925-223-8242
Fax: +1-925-223-8243
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the gut microbiota following LT. They studied the association between hepatic graft function and gut microbiota affected by immunosuppression. It is a quite interesting topic from the field of the basic research on a newly introduced factor, the gut microbiome affecting hepatic function. Given that gut microbiota has been associated with the progression of the hepatic diseases, it is worthy to find out what happens after LT with regards to immunosuppression which is crucial after LT.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

- The same title
- Duplicate publication
- Plagiarism
- No

BPG Search:

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- No



PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 40321

Title: An optimal immunosuppressor induces stable gut microbiota after liver transplantation

Reviewer’s code: 01714826

Reviewer’s country: India

Science editor: Xue-Jiao Wang

Date sent for review: 2018-07-05

Date reviewed: 2018-07-10

Review time: 5 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good		<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	(General priority)	Peer-reviewer’s expertise on the topic of the manuscript:
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		<input type="checkbox"/> Major revision	<input checked="" type="checkbox"/> General
		<input type="checkbox"/> Rejection	<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

This study by Jianwen Jiang demonstrates alteration in the gut microbiota with higher doses of immunosuppressant. Endotoxemia was also noted with increasing pathogenic bacteria. These findings were nicely correlated with histological changes in the liver. So



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7901 Stoneridge Drive, Suite 501,
Pleasanton, CA 94588, USA
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far the author deserves credit and if they can come up with a simple test which can correlate the changes in microbiota to the optimal immunosuppressant dose, it will be of great use. However extrapolating these well documented changes in the microbiota landscape to rejection is another story. One would expect the observed changes in microbiota with administration of immunosuppressant. This may further lead to up regulation of cytokine production and changes in the liver histology. Whether this changes are causing rejection is not studied in the present work. Therefore the discussion should highlight this fundamental shortcoming of this experimental study. The authors postulate that various cytokines and LPS may be involved in the pathogenesis of rejection, this was not studied or documented. I would suggest that the authors rewrite the discussion section highlighting their findings of the changing the microbiota landscape related to immunosuppression in a dose dependant manner. Finally blood levels of Tacrolimus might have been helpful.

INITIAL REVIEW OF THE MANUSCRIPT

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