



PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 56992

Title: Roxadustat for the treatment of erythropoietin-hyporesponsive anemia in a hemodialysis patient: A case report

Reviewer's code: 00503257

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Professor

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2020-05-28

Reviewer chosen by: Jin-Lei Wang

Reviewer accepted review: 2020-08-18 20:57

Reviewer performed review: 2020-08-19 05:58

Review time: 9 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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SPECIFIC COMMENTS TO AUTHORS

This MS may be somewhat interesting and informative enough for readers of the journal. However, several concerns are arisen before reconsideration of suitability of publication.

1. The patient had confused and complex background as the authors mentioned. Thus, her EPO-resistant anemia was probably not only due to chronic renal insufficiency. This issue should be clearly stated in the abstract and text. Also, the pathogenesis of her EPO-resistant anemia should be discussed in-more-depth. 2. Since the patient took several drugs, some possibility of the interaction of these drugs on the pathogenesis of her EPO-resistant anemia should be discussed. 3. Pharmacological mechanisms of roxadustat should be represented concisely for readers' understandings.



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Name of journal: World Journal of Clinical Cases

Manuscript NO: 56992

Title: Roxadustat for the treatment of erythropoietin-hyporesponsive anemia in a hemodialysis patient: A case report

Reviewer's code: 00013213

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Professor

Reviewer's Country/Territory: Egypt

Author's Country/Territory: China

Manuscript submission date: 2020-05-28

Reviewer chosen by: Jin-Lei Wang

Reviewer accepted review: 2020-08-19 16:21

Reviewer performed review: 2020-08-25 07:34

Review time: 5 Days and 15 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
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SPECIFIC COMMENTS TO AUTHORS

Thank you for presenting your case report as it provides a new approach to the management of anemia refractory to treatment with various modalities in patients with CKD who are on hemodialysis. However, there are some remarks that require your response: 1- Actually, your patient was not well controlled regarding her diabetic state and regarding her blood pressure,(B.P:168/57); her Hemoglobin A1c: 8.5) which may have in part a role in hypo responsiveness of anemia to the ESAs. You have mentioned that both were well controlled; which needs corrections. 2- You have illustrated at your tables the response of blood lipid levels 2 months after therapy with roxadustat which showed a beneficial effect, however you have not discussed this at your discussion. 3- It was expected to present changes in the other blood lines (White blood cells and platelets) 2 months post treatment with roxadustat as you have done with blood lipids. Furthermore, you have not discussed significance and relevance of assessment of CD25 and CD 59 in this patient; which better to be done. 4- You have referred to the ERI, however no data about it was presented at basal and at the posttreatment states.