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PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 70667

Title: Lung injury after cardiopulmonary bypass: Alternative treatment prospects

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05322345 Position: Peer Reviewer Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Croatia

Author's Country/Territory: China

Manuscript submission date: 2021-08-10

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-08-24 08:46

Reviewer performed review: 2021-08-24 09:43

Review time: 1 Hour

Scientific quality	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[Y] Grade A: Priority publishing [] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [Y] Minor revision [] Major revision [] Rejection
Re-review	[Y]Yes []No
Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous



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statements

Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

This review entitled "Cardiopulmonary Bypass combined with lung injury: Alternative treatment prospects" seems to have been generally well executed and written. Furthermore, I believe that this topic will be of great interest to the readers, However, I have two major remarks and one minor remark that require authors attention. Major remarks Please include the section Methodology in your paper, where the type of your study (review, probably this is the narrative review), name of the investigators who screened an available literature (only English or other languages also), name of the investigator who approved the final list of included literature in your work, time period of screening literature, and similar information's. Furthermore, recent articles demonstrated the benefit of preoperative administration of corticosteroids on cognitive outcome after cardiac surgery based on the attenuation of inflammatory response with possible implications on the some other significant postoperative outcomes when the adequate type of corticosteroids with prolonged effect, adequate dose to avoid toxic effects on neural structures, and well-timed administration to provide anti-inflammatory effects throughout the early perioperative period is used (Glumac et al. Eur J Anaesthesiol 2017 and Glumac et al. BMC Anesthesiol 2021). Therefore, these findings should be addressed in your paper. Minor remark MECHANISM OF CPB COMBINED WITH LUNG INJURY Systemic inflammatory response syndrome (SIRS) typewriter error: e.g., , histamine (Please correct it)



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Reviewer's code: 05080957

Position: Peer Reviewer

Academic degree: DNB, MBBS, MD

Professional title: Assistant Professor

Reviewer's Country/Territory: India

Author's Country/Territory: China

Manuscript submission date: 2021-08-10

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-08-24 04:56

Reviewer performed review: 2021-09-02 05:23

Review time: 9 Days

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [] Grade C: Good [Y] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [Y] Accept (General priority) [] Minor revision [] Major revision [] Rejection
Re-review	[]Yes [Y]No
Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous



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Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Greetings I read the opinion paper entitled 'Cardiopulmonary Bypass combined with lung injury: Alternative treatment prospects' with great interest. The authors have chosen a clinically important topic and I applaud the authors work. However, I have a few comments to make Title: the phrase 'Cardiopulmonary Bypass combined with lung injury' is misleading or confusing- Do you mean Lung injury after CPB or CPB associated Lung Injury?- I suggest to modify the title to be clearer Abstract: As stated in the title- I suggest using the term Lung injury following CPB or CPB associated Lung Injury in place of Cardiopulmonary Bypass combined with lung injury throughout the Keywords: Acceptable but encouraged to use MeSH words Core tip: Respiratory lung dysfunction.... Keep either respiratory or lung – not both the words Introduction Explain the full forms whenever an abbreviated form appears for the first time, e.g. CPB, I/R, ARDS. Language editing- Byrne J at al.[13] demonstrated that pretreatment with could Intralipid attenuate lung ischemia reperfusion intestine injury in rats. ... This, in turn, leads to an endothelial cell swelling, plasma and proteins extravasation into the interstitial tissue, aggregation of PMNs and macrophages at the injury site, and, finally, impede intra-alveolar cellular perfusion and oxygen exchange, causing lung injury. ... Suggestion to change to - These, in turn, leads to an endothelial cell swelling, plasma and proteins extravasation into the interstitial tissue, aggregation of PMNs and macrophages at the injury site, and, finally, impedes intra-alveolar cellular perfusion and oxygen exchange, causing lung injury. Discussion: Need to include the dose of Intralipid used, their side-effects especially on blood glucose level and possible limitations of such hyperglycemia in surgeries like on-pump CABG. References: Please follow journal style / instruction Best of luck



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