



PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 72765

Title: Liver transplantation for late-onset ornithine transcarbamylase deficiency : A case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03293832

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Senior Research Fellow

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2021-10-28

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-11-05 01:01

Reviewer performed review: 2021-11-17 02:59

Review time: 12 Days and 1 Hour

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 Grade E: Do not publish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 type="checkbox"/> Grade B: Minor language polishing <input checked="" 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 manuscript is a case report of liver transplantation for late onset OTCD induced hyperammonemia in a boy. However, this is not of publishable quality yet. Authors should revise following points and resubmit. 1. General; English writing is too immature. There are a lot of inappropriate words and expressions; for instances, “active blood ammonia lowering treatment”, “cold medicine”, “His neck was supple”, “allogeneic” etc. The words, “active blood ammonia lowering treatment” should be rewritten using “nitrogen scavenging treatment (or agents)”, “low protein diet” and “protein-free diet”. Authors should rewrite their manuscripts more thoroughly before requesting an English editing service. Also, authors should request a more skilled English editor next time. 2. General; Insert spaces appropriately in the text. 3. TITLE; The words, “ornithine transcarbamyltransferase” sound strange. It should be “ornithine transcarbamylase” or “ornithine carbamoyltransferase”. Once the term have been set, use the exactly same word throughout the text. 4. INTRODUCTION; Define “LT” again (P.3, line 7). 5. CASE PRESENTATION; Define the times of vomiting, per day or from the onset of disease to admission (P.3, line 4 from the bottom). 6. CASE PRESENTATION; Add explanation of G1P1 to be comprehensible for all readers (P.4, line 2). 7. CASE PRESENTATION; As for genetic testing (P.4, line 3 from the bottom to P.5, line 8), add the sentence “Gene testing was performed according to American College of Medical Genetics” at first. It is also necessary to cite an appropriate reference. 8. TREATMENT; Add more details about renal replacement therapy (P.5, line 8 from the bottom). In addition, the abbreviation “CRRT” is unnecessary. 9. TREATMENT; The sentence started with “We initiated ...” (P.5, line 4 from the bottom to P.6, line 3) is too



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rough and unclear. Rewrite more accurately. 10. TREATMENT; Add explanation of in situ modified back--pack LT (P.6, line 7). In addition, the word “allogeneic” sounds strange in clinical case reports. Use “brain dead donor” or “deceased donor”. 11. DISCUSSION; The sentences started with “A follow-up study ...” (P.7, line 10 to 15) are unclear. Rewrite more exactly. 12. Figure 1; Define the “Day” in horizontal axis whether the day from the onset of the disease, admission, or liver transplantation. 13. Table 1; Add the explanation of the meaning of upward arrow.



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Reviewer's code: 05068248

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Doctor, Surgical Oncologist

Reviewer's Country/Territory: Turkey

Author's Country/Territory: China

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Reviewer performed review: 2021-11-24 08:24

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Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
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Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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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

It is acceptable



RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 72765

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Reviewer's code: 03293832

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Senior Research Fellow

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

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Reviewer chosen by: Xin-Ran Guo

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Reviewer performed review: 2022-01-20 02:49

Review time: 8 Days and 17 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" 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
Peer-reviewer	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous



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statements

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

SPECIFIC COMMENTS TO AUTHORS

The revision is not completed. Authors should revise following issues. 1. The previous comment, “active blood ammonia lowering treatment” should be rewritten using “nitrogen scavenging treatment (or agents)” has not been addressed completely. 2. In spite of previous comment “Authors should rewrite their manuscripts more thoroughly before requesting an English editing service.”, authors have not properly refined the text yet. 1) Abstract: In background, the last 4 lines (starting with “and there are few) are not related to present work. Should be omitted. 2) Core tip: a phrase in line 4 to 5, “which can be used for reference by clinicians” is only confusing. Should be omitted. 3) Introduction: Add a bibliographic information as a reference to “The 2019 Urea Cycle Disorders Diagnosis and Management Recommendations guidelines”. 4) History of present illness: Add the description whether the patient and family had known OTCD or not. 5) Personal and family history: Add the description whether any of kindred had shown OTCD or symptoms that suggested OTCD or not. 6) TREATMENT: Line 1; The word “continuous renal replacement therapy” should be “continuous hemodiafiltration”. Also, add the name, catalog number, and manufacturer of hemodiafiltration column. 7) TREATMENT: Line 6; The word “ventilator-assisted ventilation” is cumbersome. Only “ventilation” is enough. 8) TREATMENT: Line 6; The words “lowering cranial pressure” are grammatically incorrect. 9) TREATMENT: Line 4 from the bottom; Indicate Glasgow score on day 35 (day 4 after transplantation). If not measured, indicate how much it was equivalent. 10) Discussion: 1st paragraph; Authors were mixing up “neonatal”, “acute”, and “late-onset”. Even “late-onset” may show “acute” course. Authors should rewrite the paragraph carefully. 11) Discussion: line 7; The words “drug therapy alone” are not appropriate. It should be “conservative treatment” which includes not only drug



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treatment but also diet therapy. 12) Discussion: line 7 to 8; Authors misquoted reference 8. The 5 year survival 45% is only severe cases requiring liver transplantation. The present sentence mislead that all OTCD cases show 5 year survival 45%. Should be rewritten. 13) Discussion: The last paragraph starting with "Several studies have" is unclear. What are "several studies" ? Authors should quote references.