

# PEER-REVIEW REPORT

Name of journal: World Journal of Meta-Analysis

Manuscript NO: 73805

Title: Effect of auricular plaster for primary hypertension in older people: A

meta-analysis

Provenance and peer review: Unsolicited manuscript; externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 04425390 Position: Editorial Board Academic degree: PhD

**Professional title:** Assistant Professor

Reviewer's Country/Territory: India

Author's Country/Territory: China

Manuscript submission date: 2021-12-04

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-12-04 09:52

Reviewer performed review: 2021-12-04 10:16

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [ ] Grade C: Good [ Y] Grade D: Fair [ ] Grade E: Do not publish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) [ ] Accept (General priority) [ ] Minor revision [ Y] Major revision [ ] Rejection
Re-review	[Y] Yes [] No



https://www.wignet.com

Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

statements Conflicts-of-

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

# SPECIFIC COMMENTS TO AUTHORS

My specific comments are mentioned below: 1. Abstract: result section author has mentioned "diastolic blood pressure (DBP) change (5.68 mmHg; 95%CI, 3.49 to 7.87; P<0.00001)" Is it SMD? significant difference in the effective ratio (OR=3.62; 95% CI, 2.46 to 5.33; P<0.00001) What do you mean by effective ratio? Its a overall estimate. 2. The statement in material and method section "When the heterogeneity was present, the random-effects model was used to calculate the pooled OR or MD, whereas the fixed effects model was used in its absence" need to be corrected as selection of model does not depend upon the results of heterogenity. It depends upon the nature of sample and will consider during the design of the study. 3. Author should mention use of Egger and Begger statistical tests. 4. Author should also mention the role of each authors in material and method section. 5. Under section of results of heterogenity, author has mentioned results of overall estimate which is incorrect. 6. There are number of grammatical and typographical errors throughout the manuscript. 7. Author has mentioned 14 studies were included for analysis however forest plot representing only 12 studies. 8. The label of forest plot should be presented correctly. 9. Why MD was calculated instead of SMD? 10. Cite suitable references for each method and mention at least one sentence for publication bias, heterogenity, model, etc for better understanding of readers. Author could check recently published metaanalysis: anisha Thakur, Ashok Kumar Datusalia, Anoop Kumar, Use of steroids in COVID-19 patients: A meta-analysis, European Journal of **ISSN** Pharmacology, 2021. 174579. 0014-2999, https://doi.org/10.1016/j.ejphar.2021.174579. Srivastava, R., & Kumar, A. (2021). Use of aspirin in reduction of mortality of COVID - 19 patients: A metanalysis.



https://doi.org/10.1111/ijcp.14515. Anuradha, U., Kumar, A., & Singh, R. K. (2021). The clinical correlation of proinflammatory and anti-inflammatory biomarkers with Alzheimer disease: a meta-analysis. Neurological Sciences, 1-14.



# PEER-REVIEW REPORT

Name of journal: World Journal of Meta-Analysis

Manuscript NO: 73805

Title: Effect of auricular plaster for primary hypertension in older people: A

meta-analysis

Provenance and peer review: Unsolicited manuscript; externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 04668002 Position: Associate Editor

Academic degree: DDS, MSc, PhD

Professional title: Associate Professor, Doctor

Reviewer's Country/Territory: Sweden

Author's Country/Territory: China

Manuscript submission date: 2021-12-04

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-12-05 06:02

Reviewer performed review: 2021-12-05 06:14

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] 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) [ ] Accept (General priority) [ ] Minor revision [ Y] Major revision [ ] Rejection
Re-review	[Y]Yes []No



https://www.wjgnet.com

Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

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

# SPECIFIC COMMENTS TO AUTHORS

Point 01 I can see that the review was not registered in an online registry for systematic reviews, like PROSPERO. The PRISMA checklist should be updated to the 2020 version. Point 02 Conclusions of the effect of auricular plaster therapy on symptom score should not be strong, as only 4 studies were included in this analysis. Point 03 The Discussion consists mainly of a short repetition of the Materials and Methods followed by a short repetition of the Results, without a discussion per se, as one can see in the 2 following paragraphs. And after these 2 paragraphs the authors jump directly to the limitations of the study. And in the 3 first paragraphs of the Discussion the authors carried out a short literature review n the subject without actually discussing the findings of the study. "Fourteen studies were included in this systematic review and meta-analysis. The meta-analysis results showed that the effective ratio of auricular plaster therapy in the treatment of hypertension based on conventional western medicine therapy was higher than that of western medicine alone therapy (OR=3.62; P<0.00001), suggesting that auricular plaster therapy had an excellent adjuvant effect on hypertension. The decrease of DBP (MD=5.68 mmHg; P<0.00001), SBP (MD=8.78 mmHg; P<0.00001), and symptom score (MD=3.20; P=0.001) were more evident than that of the control group, suggesting that the combination therapy of auricular plaster and western medicine was better than western medicine alone in improving clinical symptoms. It showed that auricular plaster therapy had significant health benefits in treating hypertension, which was worthy of clinical promotion. This study showed apparent heterogeneity in the assessment of the literature included in the improvement of SBP, DBP, and symptom scores. Although sensitivity analysis showed that heterogeneity did not affect the final results, we still



https://www.wjgnet.com

analyzed the source of heterogeneity. After further reading and analysis of the included studies, we found that the heterogeneity may be caused by different types of antihypertensive drugs, other antihypertensive mechanisms, and different effects on SBP, DBP, and clinical symptoms, which suggested that we need to conduct a subgroup analysis on different types of antihypertensive drugs."



# RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: World Journal of Meta-Analysis

Manuscript NO: 73805

Title: Effect of auricular plaster for primary hypertension in older people: A

meta-analysis

Provenance and peer review: Unsolicited manuscript; externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 04425390 Position: Editorial Board Academic degree: PhD

**Professional title:** Assistant Professor

Reviewer's Country/Territory: India

Author's Country/Territory: China

Manuscript submission date: 2021-12-04

Reviewer chosen by: Ji-Hong Liu

Reviewer accepted review: 2022-01-27 02:14

Reviewer performed review: 2022-01-27 02:19

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
Peer-reviewer	Peer-Review: [Y] Anonymous [ ] Onymous



statements

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

# SPECIFIC COMMENTS TO AUTHORS

Author has addressed all my comments in the revised manuscript



# RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: World Journal of Meta-Analysis

Manuscript NO: 73805

Title: Effect of auricular plaster for primary hypertension in older people: A

meta-analysis

Provenance and peer review: Unsolicited manuscript; externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 04668002 Position: Associate Editor

Academic degree: DDS, MSc, PhD

Professional title: Associate Professor, Doctor

Reviewer's Country/Territory: Sweden

Author's Country/Territory: China

Manuscript submission date: 2021-12-04

Reviewer chosen by: Ji-Hong Liu

Reviewer accepted review: 2022-01-28 06:53

Reviewer performed review: 2022-01-28 07:05

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [ ] Grade C: Good [ ] Grade D: Fair [ <mark>Y</mark> ] 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) [ ] Accept (General priority) [ ] Minor revision [ ] Major revision [ Y] Rejection
Peer-reviewer	Peer-Review: [ Y] Anonymous [ ] Onymous



7041 Koll Center Parkway, Suite 160, Pleasanton, CA 94566, USA **Telephone:** +1-925-399-1568

**E-mail:** bpgoffice@wjgnet.com **https:**//www.wjgnet.com

statements

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

#### SPECIFIC COMMENTS TO AUTHORS

01 Concerning my previous point 02: "Conclusions of the effect of auricular plaster therapy on symptom score should not be strong, as only 4 studies were included in this analysis." The authors replied: "Thanks, since reported data is limited, we only included 4 articles." This answer means that the authors either ignored my observation, or didn't understand. Yes, there were only 4 included articles. THEREFORE, the authors cannot conclude so strongly, as there is not enough data in order to be so sure about this. There is lack of statistical power. Without a sufficient number of studies, there is not enough information to aid in clinical reasoning and to establish a more solid foundation for causal inferences. Thus, I can only assume that the authors lack basic knowledge on meta-analysis. Therefore, the entire conclusion is inadequate. And the Discussion is based on the misconceptions that led the authors to perform meta-analyses with a very limited number of studies, when they actually shouldn't. 02 Concerning my previous point 03: "The Discussion consists mainly of a short repetition of the Materials and Methods followed by a short repetition of the Results, without a discussion per se (...)" The authors replied: "Thanks, we discuss the results and describe the results. We can do a further research in the next step." The authors opted to ignore my comment, and have not added any actual discussion to the manuscript. The manuscript still does not have a discussion, despite the fact the there is some text under the sub-title "Discussion".