



**PEER-REVIEW REPORT**

**Name of journal:** World Journal of Transplantation

**Manuscript NO:** 61088

**Title:** PERIOPERATIVE RISK FACTORS ASSOCIATED WITH DELAYED GRAFT FUNCTION FOLLOWING DECEASED DONOR KIDNEY TRANSPLANTATION: A RETROSPECTIVE, SINGLE CENTER STUDY

**Reviewer’s code:** 05382551

**Position:** Editorial Board

**Academic degree:** PhD

**Professional title:** Associate Professor

**Reviewer’s Country/Territory:** Spain

**Author’s Country/Territory:** United States

**Manuscript submission date:** 2020-11-23

**Reviewer chosen by:** Jia-Ping Yan

**Reviewer accepted review:** 2020-12-31 00:32

**Reviewer performed review:** 2020-12-31 08:26

**Review time:** 7 Hours

<b>Scientific quality</b>	<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 Grade E: Do not publish
<b>Language quality</b>	<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
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer</b>	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**

Authors presents a study about the identification of modifiable risk factors associated with kidney transplantation (DDKT). For it, it was used logistic regression. The paper describes an interesting topic that is within the scope of the journal. It is well written. The designed experiment is original. It can be read fluently. It also has an adequate number of references. With regard to content, it presents results of significant impact assuming progress in this domain. It can be accepted in its current form.



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**Reviewer’s code:** 00503195

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Associate Professor, Professor

**Reviewer’s Country/Territory:** Greece

**Author’s Country/Territory:** United States

**Manuscript submission date:** 2020-11-23

**Reviewer chosen by:** Jia-Ping Yan

**Reviewer accepted review:** 2021-01-01 09:45

**Reviewer performed review:** 2021-01-01 22:45

**Review time:** 12 Hours

<b>Scientific quality</b>	<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
<b>Language quality</b>	<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
<b>Conclusion</b>	<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
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous



statements

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

### **SPECIFIC COMMENTS TO AUTHORS**

The study is interesting, and the authors evaluated many parameters using proper statistical tests. Also, the manuscript is well-written, and the discussion of the results rational and balanced. I have the following comments. 1. The number of patients is relatively small, which, for example, excludes the possibility of a separate analysis of total graft failure (11/294) versus death censored graft failure (2/294). Certainly, the number of patients is adequate for evaluating DGF since this occurred in 26.8% of them. However, the number of patients is inadequate for assessing graft failure since this happened in only 11(3.7%) of them. The authors should note this limitation. 2. Additionally, various non-evaluated factors during the one-year postoperative period, such as immunosuppressive levels, patient compliance, and others, may have affected graft survival. And we do not know whether these factors were distributed equally between the two groups. The authors should note this limitation too. 3. There are some type errors: a. "All patients received induction immunosuppression therapy with IV basiliximab (20mg, 2 doses), rabbit antithymocyte globulin (1mg/kg daily, 3 doses), and methylprednisolone (500mg, 3 doses)." Did the patients receive both basiliximab and rabbit anti-thymocyte globulin? b. In table 2, there are two "Baseline MAP<100 mmHg, n%" rows, and only one is correct.



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**Reviewer's code:** 00504341

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Professor

**Reviewer's Country/Territory:** France

**Author's Country/Territory:** United States

**Manuscript submission date:** 2020-11-23

**Reviewer chosen by:** Jia-Ping Yan

**Reviewer accepted review:** 2021-01-01 15:02

**Reviewer performed review:** 2021-01-04 08:58

**Review time:** 2 Days and 17 Hours

<b>Scientific quality</b>	<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
<b>Language quality</b>	<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
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input checked="" type="checkbox"/> Rejection
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Peer-reviewer</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous



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

## SPECIFIC COMMENTS TO AUTHORS

Nicholas V. Mendez et al, in his analysis "PERIOPERATIVE RISK FACTORS ASSOCIATED WITH DELAYED GRAFT FUNCTION FOLLOWING DECEASED DONOR KIDNEY TRANSPLANTATION: A RETROSPECTIVE, SINGLE CENTER STUDY", detail their observations on this topic, previously mentioned in their poster at the Meeting of the Florida Society of Anesthesiologists in 2020 (<https://www.fsahq.org/2020-fsa-posters/>). This important topic of significant interest in the literature has evidently intensified in the last decade with the acceptance of expanded donors. Publications in 2020, as we have already highlighted, have intensified these studies (Rao Chen, Haifeng Wang, Lei Song, Jianfei Hou, Jiawei Peng, Helong Dai & Longkai Peng Predictors and one-year outcomes of patients with delayed graft function after deceased donor kidney transplantation. BMC Nephrol 21, 526 (2020). <https://doi.org/10.1186/s12882-020-02181-1> ; Huanxi Zhang, Qian Fu, Jinqi Liu, Jun Li, Ronghai Deng, Chenglin Wu, show all. Risk factors and outcomes of prolonged recovery from delayed graft function after deceased kidney transplantation. Renal Failure Volume 42, 2020 - Issue 1: 792-798 |) The conclusions in this regard mentioned by the authors in their manuscript: "We delineate the association between DGF and recipient characteristics of pre-induction MAP below 110mmHG, metabolic syndrome, donor-specific risk factors, HMP pump parameters, and intraoperative use of phenylephrine". They do not show significant originality with respect to the multiple literature in this regard. Regarding the mention highlighted by the authors "A novel finding of this study is the identification of pre-induction MAP <110mmHg as an independent risk factor for the development of DGF; In fact, it is difficult for us not to link it with what was stated by M. G. J. Snoeijis: Their study (cited in the authors manuscript references) indicates that



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recipient hemodynamic during transplant surgery are major predictors of PNF". "The author concludes that the effect of the recipients' hemodynamic status on NHBD kidney transplantations is statistically significant predictors of PNF were average central venous pressure (CVP), average systolic blood pressure below 110 mmHg) and pre-operative diastolic blood pressure below 80 mmHg "...). ("Recipient Hemodynamic During Non - Heart - Beating Donor Kidney Transplantation Are Major Predictors of Primary Non - function. American Journal of Transplantation 2007; Volume7, Issue5: 1158-1166) Although the study by Mendes et al, is very correctly carried out, it does not reveal new elements of interest that might contribute to the current knowledge of this important current topic



## RE-REVIEW REPORT OF REVISED MANUSCRIPT

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**Reviewer's code:** 05382551

**Position:** Editorial Board

**Academic degree:** PhD

**Professional title:** Associate Professor

**Reviewer's Country/Territory:** Spain

**Author's Country/Territory:** United States

**Manuscript submission date:** 2020-11-23

**Reviewer chosen by:** Han Zhang (Part-Time Editor)

**Reviewer accepted review:** 2021-02-08 07:45

**Reviewer performed review:** 2021-02-08 07:49

**Review time:** 1 Hour

<b>Scientific quality</b>	<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
<b>Language quality</b>	<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
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Peer-reviewer statements</b>	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**

The paper can be accepted in current form