

RESPONSES TO REVIEWERS' COMMENTS

REVIEWER 1

Reviewer's comment 1:

The English version of the article needs to be revised.

Authors' response:

Thank you for this suggestion. We have improved the quality of the language.

Reviewer's comment 2:

The authors should specify the relationship between copeptin and RAS blockers in more detail.

Authors' response:

Thank you for raising this point. Because your study did not investigate the relationship between copeptin and RAS blockers, we have decided to remove from the discussion the paragraph related to copeptin. This is mainly to remain focused and avoid confusion.

REVIEWER 2

Reviewer's comment 1:

This study entitled "Effect of preoperative renin-angiotensin system blockade on vasoplegia after cardiac surgery: a systematic review with meta-analysis" seems to have been generally well executed and written. Moreover, I believe that this topic will be of great interest to the readers.

Authors' response:

Thank you very much for the appreciation.

Reviewer's comment 2:

When the term is mentioned in the text for the first time please write it in the full, not just an abbreviation (e.g. CPB).

Authors' response:

Thank you for raising this point. We have made corrections accordingly.

Reviewer's comment 3:

Methods Did you include only the studies written on English?

Authors' response:

Thank you for the question. We include all studies, irrespective of the language. This is mentioned in the Methods section as follows: *“PubMed/MEDLINE, Excerpta Medica Database (EMBASE), and Web of Science were searched to identify all cohort studies, case-control studies or randomized controlled trials (RCTs) reporting primary data on the association between ACEIs or ARBs and the incidence of vasoplegia after cardiac surgery, published by January 13, 2021 (date of the last search), without language restriction.”*

Reviewer's comment 4:

Results When you cite the work if there is more than one author please insert after the surname of first author et al. (e.g. Section Clinical trials on continuation of ACEIs and vasoplegia, van Diepen et al.)

Authors' response:

Thank you. This has been corrected.