



## PEER-REVIEW REPORT

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

**Manuscript NO:** 80906

**Title:** Pre-Lung transplant reflux testing demonstrates high prevalence of gastroesophageal reflux in cystic fibrosis and reduces chronic rejection risk

**Provenance and peer review:** Invited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 03266250

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Associate Chief Physician

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

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

**Manuscript submission date:** 2022-11-20

**Reviewer chosen by:** Geng-Long Liu

**Reviewer accepted review:** 2023-03-02 06:37

**Reviewer performed review:** 2023-03-05 14:06

**Review time:** 3 Days and 7 Hours

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Novelty of this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
<b>Creativity or innovation of this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation



<b>Scientific significance of the conclusion in this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
<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 checked="" 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 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

**SPECIFIC COMMENTS TO AUTHORS**

1. Although the statistical data of the cohort showed that completing pre-transplant reflux testing was an independent predictor for lower risk of developing CLAD, in fact there is no causal relationship between the two. With a limited sample size, a more comprehensive analysis of the influencing factors that would affect reflux in the pre-transplant reflux-tested and non-reflux-tested groups is needed, such as the presence of other gastrointestinal diseases, the use of PPIs, and the presence of reflux-related care.

2. The manuscript mentioned “Patients with CF were less likely to undergo reflux testing during pre-lung transplant assessment compared to those with other pulmonary diagnoses”, but the title implies: Pre-Transplant Reflux Testing Demonstrates High Prevalence of Objective Gastroesophageal Reflux in Cystic Fibrosis, As the main conclusion and the title should be objective.

3. The majority of patients tested before their transplants had significant reflux symptoms, and data on whether the two cohorts used PPIs prior to transplantation should be supplemented.