



PEER-REVIEW REPORT

Name of journal: World Journal of Transplantation

Manuscript NO: 36974

Title: RENAL FUNCTION AND PHYSICAL FITNESS AFTER 12-MONTH SUPERVISED TRAINING IN KIDNEY TRANSPLANT RECIPIENTS

Reviewer’s code: 00503199

Reviewer’s country: Greece

Science editor: Li-Jun Cui

Date sent for review: 2017-11-01

Date reviewed: 2017-11-01

Review time: 16 Hours

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

Comments of this reviewer are: - To determine the aerobic and anaerobic thresholds you performed all these tests (earlobe sampling, spirometry) in every exercise session or only once at the beginning? - “The required sample size was determined using the Software G*Power (version 3.1.9.2) with an alpha level of 0.01 and a power of 0.90.” To detect which anticipated difference? And in which parameter? - Another limitation is that the exercise program prescribed, was based on blood tests (earlobe lactate) and measurements (spirometry) that are not routinely performed in gyms and cannot be universally applied. Thus the generalizability of the results is limited.



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Title: RENAL FUNCTION AND PHYSICAL FITNESS AFTER 12-MONTH SUPERVISED TRAINING IN KIDNEY TRANSPLANT RECIPIENTS

Reviewer’s code: 00522179

Reviewer’s country: United States

Science editor: Li-Jun Cui

Date sent for review: 2017-11-13

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Review time: 6 Days

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input type="checkbox"/> No	

COMMENTS TO AUTHORS

Overall, the study is well-written. However, I have a few comments regarding the study outcomes: 1) The study showed that “recommendations alone are not sufficient to induce changes in exercise capacity of KTRs.” The study finding is not totally unexpected. The study would have been more interesting if blood pressure measurements were also included in the outcome analysis. Please address 2) Glucose values were < 126 mg/dL at the three study time points in both groups. Can the authors risk stratify into non-diabetic, and pre-diabetic range rather than simply stating glucose < 126 mg /dL ? 3) The study showed no significant changes in eGFR in either group. However, the finding that creatinine tended to decrease in Group A was somewhat surprising since one would expect that resistance training exercise may help build muscle mass, hence higher serum creatinine level without change in true GFR. Any



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comments?