

PEER-REVIEW REPORT

Name of journal: World Journal of Transplantation

Manuscript NO: 50595

Title: Machine perfusion in abdominal organ transplantation: Current use in the Netherlands

Reviewer's code: 00503228

Position: Editorial Board

Academic degree: MD

Professional title: Doctor

Reviewer's country: Iran

Author's country: Netherlands

Reviewer chosen by: Jia-Ping Yan

Reviewer accepted review: 2019-08-06 03:58

Reviewer performed review: 2019-08-06 05:08

Review time: 1 Hour

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input checked="" type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input checked="" type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

Interesting article and very informative to me. Nevertheless, there are two matters that have not well been addressed in your paper. You supposed to give an overall perfect description of the safety and feasibility of the procedures in the world in general, and in specific in the Netherlands. The conclusions made for the abdominal regional perfusion of the transplant organs seem to be not based on meta-analyses and just based on the overall reports of the individual studies. For the ex-vivo practice, the meta analyses reviewed for the overall safety of the procedures are outdated; you better to make renewed meta-analyses yourself, including all the studies published up today. And also it also should be emphasized in the text that patient and graft survival in the ex-vivo model offers superiority (versus abdominal regional perfusion which represented no end-point benefit). 2. In the second part of your study, which is to report the situation in the Netherlands, you should be much more specific. The perfect approach is to find all the centers conducting researches on the issue, list them by registry number and center one by one, and give their methodology, the sample size, and results or preliminary data reports, if available. Also how much do you think the new approach would enlarge the graft availability or person year/graft-year survival rates in the Netherlands. And it would be nice to extend your research to other important issues like for example cost-effectiveness, availability in different centers, expertises needed and so on.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No



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PEER-REVIEW REPORT

Name of journal: World Journal of Transplantation

Manuscript NO: 50595

Title: Machine perfusion in abdominal organ transplantation: Current use in the Netherlands

Reviewer's code: 00503180

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Associate Professor

Reviewer's country: Egypt

Author's country: Netherlands

Reviewer chosen by: Jia-Ping Yan

Reviewer accepted review: 2019-08-13 05:20

Reviewer performed review: 2019-08-13 11:04

Review time: 5 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input checked="" type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input checked="" type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS



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Dear Sir Thank you for inviting me to review this article concerning machine perfusion in abdominal organ transplantation and its current use in the Netherlands. Very few grammar comments were found. I think we will need more clarification with detailed machine perfusion procedure and regional perfusion regarding cannulas size, pump flow, use of anti coagulation, which additives to be given in the perfusates, how to assess viability of recovering organs, how to clamp thoracic aorta. By how much did these procedures improve the wait-listed patients in Netherlands organ transplant program.?

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BPG Search:

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