



**Baishideng
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PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 54137

Title: The Cardiorenal Syndrome in patients with acute heart failure: Neutrophil Gelatinase-Associated Lipocalin (NGAL) does not predict Acute Kidney Injury in patients admitted to Coronary Intensive Care Unit

Reviewer's code: 02454185

Position: Editorial Board

Academic degree: BSc, MSc

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: Italy

Manuscript submission date: 2020-01-15

Reviewer chosen by: AI Technique

Reviewer accepted review: 2020-01-15 21:57

Reviewer performed review: 2020-01-15 23:54

Review time: 1 Hour

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 Grade E: Do not publish		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

SPECIFIC COMMENTS TO AUTHORS

Although the study result is negative that sNGAL does not predict CRS-1; the investigation is worthwhile for clinical practice. I have several comments: 1. The major concern of the study is that the outcome could be time-varying, patients can experience wax and wane of AKI depending on the fluctuation of sCr and urine output; thus, the best way to handle this situation is using survival model, that AKI is time-to-event outcome. 2. The mortality outcome should also be reported in table because mortality can be a competing risk for AKI, i.e. a patient who died early will have no chance to experience AKI, thus bias the results. I suggest to discuss this limitation and cite some useful reference (Zhang Z. Survival analysis in the presence of competing risks. *Ann Transl Med.* 2017;5(3):47. doi:10.21037/atm.2016.08.62; Competing Risks in Epidemiology: Possibilities and Pitfalls PK Andersen et al. *Int J Epidemiol* 41 (3), 861-70. Jun 2012. PMID 22253319.) for this discussion. 3. A multivariable model should also explore association of sNGAL and mortality. 4. Because patients were critically ill that managed in ICU, severity scores such as APACHE, SOFA should be reported and adjusted in multivariate model. 5. "Acute cardiorenal syndrome type 1 (CRS-1) is defined by a rapid cardiac function leading to acute kidney injury (AKI). "--should be cardiac dysfunction. 6. the KDIGO definition for AKI is influenced by the use of diuretics;



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you also need to adjust for this confounding.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

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

BPG Search:

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

RE-REVIEW REPORT OF REVISED MANUSCRIPT**Name of journal:** World Journal of Clinical Cases**Manuscript NO:** 54137**Title:** The Cardiorenal Syndrome in patients with acute heart failure: Neutrophil Gelatinase-Associated Lipocalin (NGAL) does not predict Acute Kidney Injury in patients admitted to Coronary Intensive Care Unit**Reviewer's code:** 02454185**Position:** Editorial Board**Academic degree:** BSc, MSc**Professional title:** Doctor**Reviewer's Country/Territory:** China**Author's Country/Territory:** Italy**Manuscript submission date:** 2020-01-15**Reviewer chosen by:** Ze-Mao Gong**Reviewer accepted review:** 2020-04-07 07:01**Reviewer performed review:** 2020-04-07 07:39**Review time:** 1 Hour

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
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<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	<input checked="" 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 type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

The previous comments have been well addressed.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

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

BPG Search:

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