

## PEER-REVIEW REPORT

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

**Manuscript NO:** 70201

**Title:** Latent tuberculosis: Risk factors, screening and treatment in liver transplantation recipients from an endemic area.

**Reviewer's code:** 06112817

**Position:** Peer Reviewer

**Academic degree:** MD, MSc

**Professional title:** Attending Doctor

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

**Author's Country/Territory:** Brazil

**Manuscript submission date:** 2021-07-26

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-07-26 14:39

**Reviewer performed review:** 2021-08-22 00:45

**Review time:** 26 Days and 10 Hours

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<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



**Baishideng  
Publishing  
Group**

7041 Koll Center Parkway, Suite  
160, Pleasanton, CA 94566, USA  
**Telephone:** +1-925-399-1568  
**E-mail:** bpgoffice@wjgnet.com  
**https://**www.wjgnet.com

## **SPECIFIC COMMENTS TO AUTHORS**

This is a well conducted and well written study that adds important information on LTBI in solid organ transplants. Please see below for some specific suggestions to improve the manuscript.      **Introduction:**    You could add very briefly in the introduction the sensitivity and specificity of TST in solid organ transplant population-

**Methods.**    You should describe a little more the characteristics of your hospital. Does it receive patients from areas of different prevalence of TB ? Or is it homogeneous?

    You should mention with more details the characteristics of the LTBI detection program in your hospital. You should clearly state when the implementation started, what the implementation consists of, does it include an infectious diseases consultation? Why did it take too long to be well implemented?    Also, you mention that INH 6 months is the standard of care since 2010, you should clearly state in the methods if there was no treatment indication for LTBI prior to 2010, and the reason.    Also, if TST implementation was low and no treatment was available prior to 2010, should you only include patients from 2010? What is the benefit of including patients from 2005 to 2010, if you are not including them in the TST prevalence data nor in the analysis for LTBI treatment? And why not include patients after 2012, when you finally managed to get a TST performance of >90% ?      **Results:**    Why was TST performed in less than 50% of the study population? Was it purely due to lack of implementation or also due to shortage periods? A way to see if there is no bias of selection would be to compare the general characteristics of the patients tested and the patients not tested, so you can say they are similar or not.    Is there a risk of zoonotic TB in your hospital area? If so, do you have information on epidemiological risk factors for Bovis MTB?      **Post transplant tuberculosis:** Were there any cases of TB in the group that did not receive a TST? That would be important to clarify and comment on.

**Discussion:**    Considering



**Baishideng  
Publishing  
Group**

7041 Koll Center Parkway, Suite  
160, Pleasanton, CA 94566, USA  
**Telephone:** +1-925-399-1568  
**E-mail:** [bpgoffice@wjgnet.com](mailto:bpgoffice@wjgnet.com)  
<https://www.wjgnet.com>

international guidelines recommend shorter treatments for LTBI, would it be an option to consider them in you patients' population? To tackle the issue of treatment abandonment. You should comment on that. Considering the importance of LTBI detection, are there any recommendations to improve TST application? From 2012 until now, are you still confronted with problems of TST? You should add in your discussion a paragraph on limitations of your study. Are there potential confounders? Is there a potential bias considering the population not tested? Are your results representative? For who?

## PEER-REVIEW REPORT

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

**Manuscript NO:** 70201

**Title:** Latent tuberculosis: Risk factors, screening and treatment in liver transplantation recipients from an endemic area.

**Reviewer's code:** 05562744

**Position:** Editorial Board

**Academic degree:** FACS, MD, PhD

**Professional title:** Professor, Senior Scientist

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

**Author's Country/Territory:** Brazil

**Manuscript submission date:** 2021-07-26

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-08-18 00:47

**Reviewer performed review:** 2021-08-25 16:19

**Review time:** 7 Days and 15 Hours

<b>Scientific quality</b>	<input checked="" type="checkbox"/> Grade A: Excellent <input 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>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input checked="" 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 checked="" type="checkbox"/> Accept (General priority) <input 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 type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



**Baishideng  
Publishing  
Group**

7041 Koll Center Parkway, Suite  
160, Pleasanton, CA 94566, USA  
**Telephone:** +1-925-399-1568  
**E-mail:** bpgoffice@wjgnet.com  
**https://**www.wjgnet.com

## **SPECIFIC COMMENTS TO AUTHORS**

1 Title. Does the title reflect the main subject/hypothesis of the manuscript? Yes 2  
Abstract. Does the abstract summarize and reflect the work described in the manuscript?  
Yes, it is well written 3 Key words. Do the key words reflect the focus of the  
manuscript? yes 4 Background. Does the manuscript adequately describe the  
background, present status and significance of the study? yes. the Introduction section is  
well written 5 Methods. Does the manuscript describe methods (e.g., experiments, data  
analysis, surveys, and clinical trials, etc.) in adequate detail? well written and very  
diligent work 6 Results. Are the research objectives achieved by the experiments used  
in this study? What are the contributions that the study has made for research progress  
in this field? Results are presented perfectly. 7 Discussion. Does the manuscript  
interpret the findings adequately and appropriately, highlighting the key points  
concisely, clearly and logically? Are the findings and their applicability/relevance to the  
literature stated in a clear and definite manner? Is the discussion accurate and does it  
discuss the paper's scientific significance and/or relevance to clinical practice  
sufficiently? well presented and covers all the topics in the results section 8  
Illustrations and tables. Are the figures, diagrams and tables sufficient, good quality and  
appropriately illustrative of the paper contents? Do figures require labeling with arrows,  
asterisks etc., better legends? tabels and the flow charts presented are sufficiernt 9  
Biostatistics. Does the manuscript meet the requirements of biostatistics? the statistical  
methods are appropriate 10 Units. Does the manuscript meet the requirements of use  
of SI units? yes 11 References. Does the manuscript cite appropriately the latest,  
important and authoritative references in the introduction and discussion sections? Does  
the author self-cite, omit, incorrectly cite and/or over-cite references? References are  
appropriate 12 Quality of manuscript organization and presentation. Is the manuscript



**Baishideng  
Publishing  
Group**

7041 Koll Center Parkway, Suite  
160, Pleasanton, CA 94566, USA  
**Telephone:** +1-925-399-1568  
**E-mail:** [bpgoffice@wjgnet.com](mailto:bpgoffice@wjgnet.com)  
<https://www.wjgnet.com>

well, concisely and coherently organized and presented? Is the style, language and grammar accurate and appropriate? The manuscript is high quality and the flow of logic is very well. 13 Research methods and reporting. Authors should have prepared their manuscripts according to manuscript type and the appropriate categories, as follows: (1) CARE Checklist (2013) - Case report; (2) CONSORT 2010 Statement - Clinical Trials study, Prospective study, Randomized Controlled trial, Randomized Clinical trial; (3) PRISMA 2009 Checklist - Evidence-Based Medicine, Systematic review, Meta-Analysis; (4) STROBE Statement - Case Control study, Observational study, Retrospective Cohort study; and (5) The ARRIVE Guidelines - Basic study. Did the author prepare the manuscript according to the appropriate research methods and reporting? all the documents are presented 14 Ethics statements. For all manuscripts involving human studies and/or animal experiments, author(s) must submit the related formal ethics documents that were reviewed and approved by their local ethical review committee. Did the manuscript meet the requirements of ethics? the IRB approval is obtained