

PEER-REVIEW REPORT

Name of journal: *World Journal of Gastroenterology*

Manuscript NO: 71503

Title: Assessment of pathogens and risk factors associated with bloodstream infection in the year after pediatric liver transplantation

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 02527808

Position: Editor-in-Chief

Academic degree: MD

Professional title: Professor

Reviewer's Country/Territory: Egypt

Author's Country/Territory: South Korea

Manuscript submission date: 2021-09-15

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-09-15 22:51

Reviewer performed review: 2021-09-26 02:07

Review time: 10 Days and 3 Hours

Scientific quality	<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 Grade E: Do not publish
Language quality	<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
Conclusion	<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
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Peer-reviewer statements	Peer-Review: [<input checked="" type="radio"/>] Anonymous [<input type="radio"/>] Onymous Conflicts-of-Interest: [<input type="radio"/>] Yes [<input checked="" type="radio"/>] No
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SPECIFIC COMMENTS TO AUTHORS

The manuscript entitled (Blood stream infections in the first year after liver transplantation in children) is a well written manuscript with real life experience about this important issue . however some comments to be considered 1- The title needs verb as (evaluation or assessment ---)to be more conclusive 2- introduction need definition first of blood stream infection). 3- what the number of cases have dual infections 4 what is effect of CMV infection (59 %) and EBV on the survival. you focus only on bacterial infections and neglect these viral infection during discussing your results 5- The discussion better be started by time line of infection after transplantation and accordingly a table better be added to classify these infection according to timeline after transplantation. 6- References not coping with the style of the journal(e.g where the DOI PMID)

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Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05088164

Position: Associate Editor

Academic degree: MD, PhD

Professional title: Associate Professor

Reviewer's Country/Territory: Romania

Author's Country/Territory: South Korea

Manuscript submission date: 2021-09-15

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-09-27 19:03

Reviewer performed review: 2021-10-02 21:52

Review time: 5 Days and 2 Hours

Scientific quality	<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
Language quality	<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
Conclusion	<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
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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SPECIFIC COMMENTS TO AUTHORS

I had the pleasure of reading the manuscript on bloodstream infections in children after liver transplantation. The paper's title correctly reflects the main subject, bloodstream infections and risk factors in liver transplantation in children from a single center from South Korea. The abstract summarizes and correctly reflects the main aspects of this study. Better not to repeat the number of the patients, both in methods and results. The keywords reflect well the focus of the manuscript. The authors described the background and the present status of bloodstream infections as a complication in the early period after LT. The methods are described in adequate detail, presenting the subjects, the definition of the variables, and the statistical methods used. The authors also present the antimicrobial prophylaxis and immunosuppression used in their center. The research objectives were achieved as the authors presented their patients' demographics, the characteristics of bloodstream infections, and the clinical impact on post-liver transplantation outcomes. Also, they analyzed the risk factors for bloodstream infections in the first year after LT. The study results contributed to the design of a nomogram to estimate the risk for bloodstream infections. In the Discussion section, the authors discussed their findings adequately compared to other studies in adults and children. The authors also presented the limitations of this study: a retrospective study, the limited number of patients that limits some risk factors analysis, need for external validation of the proposed nomogram for bloodstream infections risk evaluation. I would include a paragraph on the strengths of the study. The results are presented with the help of 3 tables and 2 figures. Also, the authors included supplementary 2 figures and 4 tables. The manuscript cites appropriately important references, 10 of those from



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the last 3 years. Overall, the manuscript is well and coherently organized using proper language. Few minor corrections should be made. The authors must verify the punctuation and some English language errors again.

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Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05755592

Position: Editorial Board

Academic degree: FCPS, MBBS

Professional title: Assistant Professor

Reviewer's Country/Territory: Pakistan

Author's Country/Territory: South Korea

Manuscript submission date: 2021-09-15

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-09-27 05:46

Reviewer performed review: 2021-10-04 05:55

Review time: 7 Days

Scientific quality	<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
Language quality	<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
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Peer-reviewer statements	Peer-Review: [<input checked="" type="checkbox"/>] Anonymous [<input type="checkbox"/>] Onymous Conflicts-of-Interest: [<input type="checkbox"/>] Yes [<input checked="" type="checkbox"/>] No
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SPECIFIC COMMENTS TO AUTHORS

please answer the questions raised by reviewer and correct the mistakes pointed by reviewer.

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Peer-review model: Single blind

Reviewer's code: 05189300

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Chief Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: South Korea

Manuscript submission date: 2021-09-15

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-10-01 02:12

Reviewer performed review: 2021-10-10 02:58

Review time: 9 Days

Scientific quality	<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
Language quality	<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
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Peer-reviewer statements	Peer-Review: [<input type="checkbox"/>] Anonymous [<input checked="" type="checkbox"/>] Onymous Conflicts-of-Interest: [<input type="checkbox"/>] Yes [<input checked="" type="checkbox"/>] No
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SPECIFIC COMMENTS TO AUTHORS

Comments to the authors: This is a well written article that analyzed the profile of BSI according to the postoperative periods and assessed the risk factors of BSI in pediatric LT. Your paper requires an overhaul to include the following information: - Methods: In the “Statistical analysis” section, the authors stated that “For the continuous variables, receiver-operating characteristic (ROC) curve analysis was performed to identify the optimal cutoff values with the area under the ROC curve (AUC).” As there might be nonlinear relationship between continuous variables (e.g., age, height z-score, weight z-score, volume of RBC transfusion, and post LT hospital day) and BSI in pediatric LT, this strategy might couldn’t reflect the real association for this issue. I suggest using restricted cubic splines to explore the best cut-off values for these variables, which is more powerful for dealing with continuous variables. The model should be reconstructed by this strategy. - Results: In the last paragraph, the authors stated that, “The predictive performance of the model was internally validated through 10-fold cross-validation and the average validation-corrected AUC was 0.701 (95% CI: 0.641~0.762) (Supplementary Table 4), suggesting overfitting of apparent performance in the analysis.” Do you mean the model was overfitted? If so, the model may cannot be applied to other cohorts. -Discussion: Just as you stated that, “this nomogram needs an external validation”.