

PEER-REVIEW REPORT

Name of journal: *World Journal of Transplantation*

Manuscript NO: 72632

Title: Innovative immunosuppression in kidney transplantation: A challenge for unmet needs

Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05040165

Position: Editorial Board

Academic degree: MD

Professional title: Associate Professor

Reviewer's Country/Territory: Thailand

Author's Country/Territory: Italy

Manuscript submission date: 2021-10-22

Reviewer chosen by: Qi-Gu Yao (Online Science Editor)

Reviewer accepted review: 2021-12-17 04:59

Reviewer performed review: 2021-12-26 15:52

Review time: 9 Days and 10 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 Grade E: Do not publish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 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



**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>

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

“Innovative immunosuppression in kidney transplantation: a challenge for unmet needs”

This review aims to summarize available literature on new innovative drugs for kidney transplantation. The review was carefully done. This is a very interesting paper. You did a great job on provide evidence that principal unmet needs are treatment and prevention of delayed graft function, improve the long-term outcomes, desensitization and treatment of acute antibody-mediated rejection. However, there are some flaws, which should be resolved as following. 1. Systematic reviews and meta-analyses are considered to be the highest quality evidence on a research topic because their study design reduces bias and produces more reliable findings. Please add evidence from recent systematic review and meta-analysis. 2. Finally, since I am not a native English user, I did not check for grammatical errors thoroughly. This should be done by an appropriate language reviewer.

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Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03291255

Position: Peer Reviewer

Academic degree: PhD

Professional title: Assistant Professor

Reviewer's Country/Territory: United Kingdom

Author's Country/Territory: Italy

Manuscript submission date: 2021-10-22

Reviewer chosen by: Qi-Gu Yao (Online Science Editor)

Reviewer accepted review: 2021-12-30 11:18

Reviewer performed review: 2022-01-09 11:00

Review time: 9 Days and 23 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
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SPECIFIC COMMENTS TO AUTHORS

I read with great interest the review article titled, 'Innovative immunosuppression in kidney transplantation: a challenge for unmet needs' by M. Salvadori and A Tsalouchos. On the whole a well written informative article. A few suggestions: Abstract: ABO incompatible to be changed to antibody incompatible transplantation as only HLAi desensitization has been discussed with inclusion of some common treatment against ABMR resulting from ABOi transplant. Page 5 – Anti apoptotic strategies. To provide reason for why the RCT was terminated. is there any possibility of pursuing this option in the future? Pegylated carboxy haemoglobin – 2 line – 'It also plays roles in protecting against protection against DGF' – to correct repetition To add the summary of the findings so far Page 9: Paragraph 2 – Please add the correlation between EBV seronegatives and PTLD in the Belatacept group Page 14 Paragraph 1 – Please correct typo Cq1s Conclusion: 3rd Page 15 Paragraph 3 – Please change ABOi to AIT. Also, please remove 'living donors' as AIT includes both deceased and living donor transplants.