

Dear Editors and Reviewers:

Thank you very much for your letter and for the reviewers' comments concerning our manuscript entitled "Protective effect of rhBNP on contrast-induced nephropathy in elderly acute myocardial infarction patients after PCI" (MS No: 78831). Those comments are all valuable and very helpful for revising and improving our paper, as well as the important guiding significance to our researches. We have studied comments carefully and have made a correction which we hope meets with approval. We have addressed the comments raised by the reviewers, and the amendments are highlighted in red in the revised manuscript, Title page, abstract et. Point by point responses to the reviewers' comments is listed below this letter. Thank you! We hope that the revised version of the manuscript is now acceptable for publication in your journal.

I look forward to hearing from you soon.

With best wishes,

Yours sincerely,

Jun Li

We would like to express our sincere thanks to the reviewers for their constructive and positive comments.

Replies to Reviewers

Specific Comments

Reviewer: 1

Comments to the Author

Reviewer #1:

Scientific Quality: Grade B (Very good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Accept (High priority)

Specific Comments to Authors: 1. Please change the key word nephrosis in abstract to relevant word like AKI or contrast nephropathy or CIAKI or nephropathy

**Author Response:** Thank you very much for your professional comments and give us

a chance to improve the quality of our manuscript. We had revised it, change the key word nephrosis to AKI. Thank you!

2. Please define primary and secondary outcomes in methodology.

**Author Response:** Thank you very much for your professional comments. We had defined the primary and secondary outcomes in methodology, thank you!

3. Please mention sample size calculation method in methodology.

**Author Response:** Thank you very much for your professional comments. We had sample size calculation method in methodology, thank you!

4. Please mention generalizability of study in discussion before or after limitations in discussion part

**Author Response:** Thank you very much for your professional comments, we had revised and added it. Thank you!

Reviewer #2:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Major revision

Specific Comments to Authors: Greetings I read the manuscript with with interest. The authors have analyzed the effect of protective effect of rhBNP on contrast-induced nephropathy in elderly acute myocardial infarction patients after percutaneous coronary interventions. The topic is of clinical relevance. Overall the manuscript is well written,yet, a significant revision / modification is required. Title: Type of the study can be mentioned Abstract: Methodology- a sentence or two on data management is required. Conclusion- data presented in the abstract do not suggest and support the decreasing the incidence of acute heart failure- present the data. Keywords: Better to use MeSH terms Introduction: CIN and rhBNP is well mentioned, but, the incidence of CIN in PCI patients and their impact is missing to justify the study.

Methodology: You have included patients aged 60 and above, whereas elderly is > 65. In my opinion, your elderly term should be replaced with older than 60. Please include how you have maintained the blood pressure in an acceptable range during the study period. It is crucial as hypotension can affect AKI incidence. Further, please mention about fluid management. Please mention the sample size calculation. Results and Discussion: Ok, limitation of the study is discussed. Conclusion: Ok References: Ok Tables and figures- Ok Best of luck

**Author Response:** Thank you very much for your professional comments and give us a chance to improve the quality of our manuscript.

We had revised the Title, Abstract, Methodology, Conclusion, and Keywords according to your comments.

Introduction: We had added the incidence of CIN in PCI patients and their impact in the introduction.

Methodology: In China, elderly is > 60, and all 131 elderly patients were assessed in this trial in Jiangsu between Jan 2017 to Jul 2021, so, the Inclusion criteria as Aged more than 60 years. Thank you for your good comments.

We had added the management of blood pressure and fluid in the methodology. Thank you very much for your very professional comments.

We had sample size calculation method in methodology, thank you!

We had sent the manuscript to the “Bullet edits” professional English language editing company to polish the manuscript further. Thank you!