

PEER-REVIEW REPORT

Name of journal: World Journal of Meta-Analysis

Manuscript NO: 82949

Title: Infertility, Pregnancy and Breastfeeding in Kidney Transplantation Recipients: Key Issues

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03547306

Position: Peer Reviewer

Academic degree: PhD

Professional title: Chief Doctor

Reviewer's Country/Territory: Serbia

Author's Country/Territory: Saudi Arabia

Manuscript submission date: 2022-12-31

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-12-31 14:26

Reviewer performed review: 2022-12-31 14:27

Review time: 1 Hour

	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C:
Scientific quality	Good
	[] Grade D: Fair [] Grade E: Do not publish
Novelty of this manuscript	[] Grade A: Excellent [Y] Grade B: Good [] Grade C: Fair [] Grade D: No novelty
Creativity or innovation of	[] Grade A: Excellent [Y] Grade B: Good [] Grade C: Fair
this manuscript	[] Grade D: No creativity or innovation



Scientific significance of the conclusion in this manuscript	 [] Grade A: Excellent [Y] Grade B: Good [] Grade C: Fair [] Grade D: No scientific significance
Language quality	[Y] Grade A: Priority publishing [] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	 [] Accept (High priority) [Y] Accept (General priority) [] Minor revision [] Major revision [] Rejection
Re-review	[]Yes [Y]No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

very nice



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Title: Infertility, Pregnancy and Breastfeeding in Kidney Transplantation Recipients: Key Issues

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03622345

Position: Peer Reviewer

Academic degree: Doctor, MD, PhD

Professional title: Professor

Reviewer's Country/Territory: Egypt

Author's Country/Territory: Saudi Arabia

Manuscript submission date: 2022-12-31

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-12-31 10:26

Reviewer performed review: 2023-01-04 09:25

Review time: 3 Days and 22 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [] Grade C: Good
	[] Grade D: Fair [Y] Grade E: Do not publish
Novelty of this manuscript	[] Grade A: Excellent [] Grade B: Good [] Grade C: Fair [Y] Grade D: No novelty
Creativity or innovation of this manuscript	[] Grade A: Excellent [] Grade B: Good [] Grade C: Fair [Y] Grade D: No creativity or innovation



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Conclusion	 [] Accept (High priority) [] Accept (General priority) [] Minor revision [] Major revision [Y] Rejection
Re-review	[]Yes [Y]No
Peer-reviewer statements	Peer-Review: [] Anonymous [Y] Onymous Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

In this review there is no definite conclusion, un related details to different topics, no conclusion.



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Manuscript NO: 82949

Title: Infertility, Pregnancy and Breastfeeding in Kidney Transplantation Recipients: Key Issues

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03546647

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Assistant Professor, Surgeon

Reviewer's Country/Territory: Italy

Author's Country/Territory: Saudi Arabia

Manuscript submission date: 2022-12-31

Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2023-01-11 10:10

Reviewer performed review: 2023-01-11 12:18

Review time: 2 Hours

	[] Grade A: Excellent [] Grade B: Very good [] Grade C:
Scientific quality	Good
	[Y] Grade D: Fair [] Grade E: Do not publish
Novelty of this manuscript	 [] Grade A: Excellent [Y] Grade B: Good [] Grade C: Fair [] Grade D: No novelty
Creativity or innovation of	[] Grade A: Excellent [] Grade B: Good [Y] Grade C: Fair
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Language quality	[Y] Grade A: Priority publishing [] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	 [] Accept (High priority) [] Accept (General priority) [] Minor revision [Y] Major revision [] Rejection
Re-review	[Y]Yes []No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

The present narrative review focuses on a relevant topic, but it mostly fails to provide in depth discussion regarding most relevant issues related to conception and pregnancy after kidney transplantation. Major comments 1) In the section "Impact of pregnancy on graft survival", the authors should discuss the possibility of selection bias (relative contraindication to pregnancy in case of suboptimal allograft function) affecting the interpretation of results. 2) In the section "Management of immunosuppression", both male- and female-related issues should be considered. 3) In the section "Management of immunosuppression", common drug-related side effects and interactions that may have an impact on pregnancy as well as follow up strategies aiming to reduce the risk of rejection after switching medications should be discussed. 4) In the section "Management of immunosuppression", the opportunity to switch from tacrolimus to cyclosporine in case of impaired fasting glucose, abnormal OGTT, or gestational diabetes should be discussed. 5) In the section "Manage non-immunosuppression drugs", a brief discussion about commonly used antibiotics during pregnancy would be appreciated. 6) The present review fails to discuss any frequent infectious complication potentially



affecting pregnancy, including TORCH. Minor comments 1) Please, provide higher quality images. 2) There are several typos scattered throughout the manuscript.



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Novelty of this manuscript	[] Grade A: Excellent [Y] Grade B: Good [] Grade C: Fair
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Re-review	[]Yes [Y]No
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SPECIFIC COMMENTS TO AUTHORS

findings of this manuscript: a transplant recipient planning pregnancy should discontinue sirolimus 12 weeks before pregnancy, and MMF 8 weeks before. The combination of calcineurin inhibitors, azathioprine and steroids are safe in pregnant recipients