

## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Hepatology*

**Manuscript NO:** 84715

**Title:** Shifting perspectives in liver diseases after kidney transplantation

**Provenance and peer review:** Invited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 05447441

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

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

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

**Manuscript submission date:** 2023-03-26

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2023-03-29 06:22

**Reviewer performed review:** 2023-04-09 15:46

**Review time:** 11 Days and 9 Hours

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 Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation

<b>Scientific significance of the conclusion in this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
<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 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

## SPECIFIC COMMENTS TO AUTHORS

1. This paper focused on the liver disease after KT, which has a significant impact on the survival and quality of life of these patients; 2. The article is relatively detailed. The article describes the effects of NAFLD viral hepatitis, drug-induced liver damage and other aspects on survival and quality of life after kidney transplantation. Appeal Healthcare professionals to prioritize KT recipient screening for liver disease. Early diagnosis and referral to a hepatologist is critical to manage underlying liver issues. 3. However, the article should also cover the influence of some metabolic factors on the liver, such as liver damage caused by abnormal metabolism of alcohol, copper and iron, such as Wilson Disease and haemochromatosis. And autoimmune liver diseases, such as AIH and PBC, all of which need to be considered. 4. It is mentioned in the article: "Therefore, in chronically infected patients without signs of hepatitis, liver fibrosis or cirrhosis, without extrahepatic manifestations of HBV and with low viral replication rates (as determined by HBsAg and HBV DNA), treatment is not usually recommended by professional society guidelines. [23,27]" While in fact, increasingly guidelines recommend aggressive antiviral therapy for patients with CHB, as long as



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HBVDNA is detectable, especially in people over 30 years of age and with a family history of HCC and cirrhosis.

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**Peer-review model:** Single blind

**Reviewer's code:** 03303427

**Position:** Peer Reviewer

**Academic degree:** PhD

**Professional title:** Professor

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

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

**Manuscript submission date:** 2023-03-26

**Reviewer chosen by:** Geng-Long Liu

**Reviewer accepted review:** 2023-04-17 10:50

**Reviewer performed review:** 2023-04-19 13:27

**Review time:** 2 Days and 2 Hours

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
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation

<b>Scientific significance of the conclusion in this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
<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 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 type="checkbox"/> Yes <input checked="" 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

#### SPECIFIC COMMENTS TO AUTHORS

1, In the part of "NAFLD and CKD", there is too little written about your title liver diseases. 2, Maybe it will be better to retouch the language in the discussion section.

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**Provenance and peer review:** Invited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 03664208

**Position:** Peer Reviewer

**Academic degree:** BCPS

**Professional title:** MHSc

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

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

**Manuscript submission date:** 2023-03-26

**Reviewer chosen by:** Geng-Long Liu

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**Reviewer performed review:** 2023-04-27 10:18

**Review time:** 10 Days and 22 Hours

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
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
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	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

## SPECIFIC COMMENTS TO AUTHORS

Liver is the most common organ complicated by kidney transplantation. In addition to Autosomal dominant polycystic kidney disease (ADPKD), this study focuses on the causes and treatment progress of four major types of liver diseases complicated by non-alcoholic fatty liver disease, viral liver disease, liver injury induced by COVID-19 and drug-induced liver injury after kidney transplantation. It provides the idea for prevention and early treatment of liver complications after clinical kidney transplantation. This study is an updated review of liver disease associated with kidney transplantation, which is somewhat innovative and coherent. Overall, this study has clinical significance. There are, however, some shortcomings in the study, the following suggestions are put forward: 1. In my opinion, the title "Shifting perspectives in liver diseases after kidney transplantation" does not accurately reflect the main content of the article and needs to be modified. 2. There are 7 keywords in the paper. It is recommended to list 3 to 5 keywords. 3. The INTRODUCTION briefly proposed the etiology of liver disease after kidney transplantation, but does not fully describe the background and status of current research, so a supplement is recommended.. 4. It is

suggested to add the topic of Table1. 5. A total of 120 references are cited in this article, which is relatively large, and the latest references are recommended. 6. In each subsection of this article, the research progress of various liver diseases after kidney transplantation is not detailed, and it is suggested to supplement and focus on the latest research progress in related fields that the authors are currently concerned about.