



## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Nephrology*

**Manuscript NO:** 88972

**Title:** Exploring Renal Biopsy Findings in Congenital Heart Diseases: Insights Beyond Cyanotic Nephropathy, A Case Series

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

**Peer-review model:** Single blind

**Reviewer's code:** 02446043

**Position:** Editorial Board

**Academic degree:** FACC

**Professional title:** Lecturer

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

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

**Manuscript submission date:** 2023-10-18

**Reviewer chosen by:** Yu-Lu Chen

**Reviewer accepted review:** 2023-11-30 07:37

**Reviewer performed review:** 2023-12-01 09:37

**Review time:** 1 Day and 1 Hour

<b>Scientific quality</b>	<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 Grade E: Do not publish
<b>Novelty of 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 novelty
<b>Creativity or innovation of 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 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 checked="" type="checkbox"/> Grade A: Priority publishing <input 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 checked="" type="checkbox"/> Accept (General priority) <input 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 type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**SPECIFIC COMMENTS TO AUTHORS**

This is a case series of a rare association - congenital heart disease and chronic renal disease - looking for possible therapeutic avenues to delay renal replacement therapy. It is interesting and informative; it can be accepted after minor revisions: i) the authors present the 10 cases over a 23yr period where renal biopsies of congenital heart disease patients were available. To let readers have an understanding of the magnitude of the problem, they should elaborate in the Results or Discussion how many cases of congenital heart disease they handled in this period, and how many cases of both congenital heart and renal disease patients they saw over the similar period. ii) In Table 2, for the last 41yr old patient, sex of "hombre" is inappropriate. iii) In their Discussion, the authors should make concrete practical recommendations on when renal biopsy should be performed in patients with both congenital heart and kidney disease