

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-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 82319

Title: Ineffective Esophageal Motility is Associated with Acute Rejection After Lung

Transplantation Independent of Gastroesophageal Reflux

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03252977 Position: Peer Reviewer Academic degree: MD

**Professional title:** Attending Doctor

Reviewer's Country/Territory: Croatia

Author's Country/Territory: United States

Manuscript submission date: 2023-03-05

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-03-13 06:07

Reviewer performed review: 2023-03-23 07:51

**Review time:** 10 Days and 1 Hour

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	[ ] Grade D: Fair [ ] Grade E: Do not publish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



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Scientific significance of the conclusion in this manuscript	[ Y] Grade A: Excellent [ ] 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

Dear Authors, I would like to congratulate you on the work you have done! work is very interesting and also educative - I'm sure it will be useful for all clinicians who deal with severe lung diseases. While I was reading the manuscript, I was only concerned with the fact that you used Chicago v 3.0, but in the end you nicely explained your limitations and therefore I have nothing further to object. Kindest regards



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Reviewer's code: 04025443 Position: Editorial Board Academic degree: MD, PhD

**Professional title:** Doctor, Senior Researcher

Reviewer's Country/Territory: Russia

**Author's Country/Territory:** United States

Manuscript submission date: 2023-03-05

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-03-26 05:26

Reviewer performed review: 2023-04-02 13:00

**Review time:** 7 Days and 7 Hours

	[ ] 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	[ Y] Grade A: Excellent [ ] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No novelty
Creativity or innovation of	[Y] Grade A: Excellent [ ] Grade B: Good [ ] Grade C: Fair
this manuscript	[ ] Grade D: No creativity or innovation



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Scientific significance of the	[ ] Grade A: Excellent [ Y] Grade B: Good [ ] 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) [Y] Accept (General priority) [ ] Minor revision [ ] Major revision [ ] Rejection
Re-review	[Y] Yes [] No
Peer-reviewer statements	Peer-Review: [ ] Anonymous [ Y] Onymous  Conflicts-of-Interest: [ ] Yes [ Y] No

### SPECIFIC COMMENTS TO AUTHORS

I read with pleasure and interest the paper by Wai-Kit Lo and colleagues entitled "Ineffective Esophageal Motility is Associated with Acute Rejection After Lung Transplantation Independent of Gastroesophageal Reflux". It is based on the data obtained in a retrospective cohort trial that analyzed association between pre-existing ineffective esophageal motility (established with high-resolution esophageal manometry) and risk of acute resection after lung transplantation. The results really fill knowledge gaps, bring new to the field and may be interesting to the readers. The manuscript is well-written. I have only a few minor comments. 1. Please, add the information about the type of manometry system used in the study (i.e., water-perfused or solid state). If both, could this heterogeneity impact the results? 2. Please, disclose the abbreviations at first mention (including tables). 3. Could there be an influence of chronic pulmonary diseases on esophageal motility (including medications used for their treatment)? I suppose this worth mentioning in the Discussion.