



**PEER-REVIEW REPORT**

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

**Manuscript NO:** 49594

**Title:** Broad spectrum of interferon-related nephropathies – glomerulonephritis, systemic lupus erythematosus-like syndrome and thrombotic microangiopathy: A case report and review of literature

**Reviewer’s code:** 00503182

**Position:** Editorial Board

**Academic degree:** MD

**Professional title:** Professor

**Reviewer’s country:** Egypt

**Science editor:** Jia-Ping Yan

**Reviewer accepted review:** 2019-06-10 21:05

**Reviewer performed review:** 2019-06-10 21:49

**Review time:** 1 Hour

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input checked="" type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input checked="" type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer’s expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input checked="" type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

**SPECIFIC COMMENTS TO AUTHORS**



**Baishideng  
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Paper need some language polish, I recommend some in the attached file The text can be reduced especially in describing patients's data, as detailed data were shown in table (2). Figure (1) needs some explanation for its necessity to be part of manuscript

#### **INITIAL REVIEW OF THE MANUSCRIPT**

##### ***Google Search:***

- The same title
- Duplicate publication
- Plagiarism
- No

##### ***BPG Search:***

- The same title
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- Plagiarism
- No



**PEER-REVIEW REPORT**

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

**Manuscript NO:** 49594

**Title:** Broad spectrum of interferon-related nephropathies – glomerulonephritis, systemic lupus erythematosus-like syndrome and thrombotic microangiopathy: A case report and review of literature

**Reviewer’s code:** 00503252

**Position:** Editorial Board

**Academic degree:** MD,PhD

**Professional title:** Professor

**Reviewer’s country:** Japan

**Science editor:** Jia-Ping Yan

**Reviewer accepted review:** 2019-06-11 06:49

**Reviewer performed review:** 2019-06-13 06:12

**Review time:** 1 Day and 23 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
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Glanassi et al. reported 4 cases with interferon-related kidney injury, discussed their pathogenesis and reviewed relevant literature. The Authors presented the first case with IFN- $\beta$ -related SLE-like syndrome. There are some concerns to be addressed. Major 1. Patient 1: Describe more in detail renal findings. Which areas do you find TMA findings in small arteries and/or glomeruli? Was TMA the acute or chronic appearance? 2. Patient 2: What kind of active lesion did you find in glomeruli? What about immunofluorescent findings? Was C1q positive in glomeruli? 3. Patient 3 and 4: Provide immunofluorescent findings in kidney biopsy. Also how about findings of IgG subclass? Then, based on the findings please discuss possibilities of secondary membranous nephropathy. 4. The time sequential urinalysis and renal function in each case after withdrawal of IFN should be shown in table or figure. The follow-up data of serology should be included in case 2. So that the readers can learn how the kidneys could improve. Minor 1. P2.L6 from the last line. "glomerula" should be "glomerulus". 2. P3.L9. The term nephrotic syndrome needs serum albumin level. 3. P3.L10 and P3.L26. "/die" read "/day" 4. P4.L8 from the last line. "TNF $\alpha$ " should be "TNF- $\alpha$ ".

## INITIAL REVIEW OF THE MANUSCRIPT

### *Google Search:*

- The same title
- Duplicate publication
- Plagiarism
- No

### *BPG Search:*

- The same title



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Duplicate publication

Plagiarism

No