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PEER-REVIEW REPORT

Name of journal: *World Journal of Transplantation*

Manuscript NO: 87752

Title: Pediatric and adult liver transplantation in Bahrain: The experiences in a country with no available liver transplant facilities

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03755068

Position: Peer Reviewer

Academic degree: MD

Professional title: Consultant Physician-Scientist

Reviewer's Country/Territory: Italy

Author's Country/Territory: Bahrain

Manuscript submission date: 2023-10-07

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-10-08 09:17

Reviewer performed review: 2023-10-08 14:29

Review time: 5 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" 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 Grade E: Do not publish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

Scientific significance of the conclusion in 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 scientific significance
Language quality	<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
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Peer-reviewer statements	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

I would like to thank for the opportunity to revise this manuscript. This was a single center, retrospective, observational study from Iran, which investigated the rate of invasive fungal infection by Candida strains among 275 patients who underwent SOT in a 6-m period (Sept, 2021-Mar, 2022). 22 patients experienced an infection (mainly respiratory and urinary tract). The Authors showed that candida albicans was the most common strain, but there was a rising rate of non-albicans species. Patients experiencing IFI had worse post-SOT outcome in terms of 6-mo mortality, although no difference was found after stratification between candida vs. non-candida strains. The aim of the paper is potentially of interest. There are, however, several concerns regarding the low sample size (n. 22 infections) and the heterogeneity about type of SOT (first vs re-transplant; multivisceral vs. single organ transplant); the algorithm of prophylaxis to be administered at transplant was not described in detail and was different according to transplanted organ (targeted prophylaxis in KT, universal prophylaxis in LT recipients); the diagnosis of some infections was at day-1 after transplant (did they develop before or during SOT?); the absence of universal treatment after diagnosis



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(invasive disease or colonization?). Moreover, the association between specific classes of antimicrobials (quinolones and linezolid) and IFI requires further explanation. I read with interest this paper which shed the light on outcome of LT patients from Bahrain. The Authors collected charts of all patients who were sent overseas for LT, given the absence of LT program in Bahrain. Therefore, this was a picture of a relatively small number of patients (n. 170 patients in 25 years) who underwent LT outside Bahrain but subsequently received medical and surgical follow-up in the Country. I think that the topic is of interest because this paper may be of help in developing and building a well-recognized LT program in the future. There are, in my opinion, several comments - I suggest to shorten the paper (the discussion section is very long) and to delete some comparisons (e.g., between children and adults). Indeed, it is well known that adult and paediatric patients share different indications to transplantation, as well as different outcomes - I suggest to add graft survival curves - There are some typos (e.g., mycophenolic acid) throughout the manuscript which should be corrected - I suggest to update references - I do not understand very well the meaning of Suppl Table 2 - A perspective about the future of LT program in Bahrain would be of help



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Reviewer's code: 04383865

Position: Peer Reviewer

Academic degree: MBChB, MD, PhD

Professional title: Assistant Professor

Reviewer's Country/Territory: United Arab Emirates

Author's Country/Territory: Bahrain

Manuscript submission date: 2023-10-07

Reviewer chosen by: Yu-Lu Chen

Reviewer accepted review: 2023-11-06 05:26

Reviewer performed review: 2023-11-14 08:20

Review time: 8 Days and 2 Hours

Scientific quality	<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
Novelty of this manuscript	<input checked="" type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
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Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Peer-reviewer statements	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

Very interesting article regarding the Liver transplantation outcome at the Kingdom of Bahrain. It was also interesting to present the different transplantation centers and to compare the results with the other countries. The article is well-written. Here you are some few comments to clarify some points and to improve the quality: 1. The abstract is too long, most of the results values should be removed. 2. In abstract methods, it will be interesting to show that the majority of the patients were Bahraini in nationality. 3. In abstract results, please clarify what was the most common type of infection (bacterial, viral, etc.). 4. In material & methods, data collection: It is not clear how the cadaveric graft was selected. It would be also interesting to investigate if the patients have received any liver support medications such as NAC. 5. In results, please add the average of the hospitalization duration for the patients. It will be also interesting to clarify which center had better outcome compared to the others and if there is any specific reason for that. 6. It was mentioned in results that six patients required re-transplantation. Please add the duration between the first transplantation and the re-transplantation. 7. It was also mentioned that there was no significant difference between pediatrics and adults in

terms of LT center location. How about the success rates per center between pediatrics and adults? In other words, is there a specific center that can be recommended for adults and other centers that are specialized in pediatrics? 8. The median number of visits was reported to be 3. How often was it? Once a year, twice a year? 9. The discussion is too long and the references authors names are not necessarily. 10. It is not clear in the text what types of infectious episodes did the patients have. 11. It will be interesting to explain why the HCV incidence is high in Bahrain and what are the underlying causes.