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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 28390

Title: Cardiovascular risk after OLT, a review of the literature and preliminary results of a prospective study

Reviewer's code: 00054465

Reviewer's country: United States

Science editor: Yuan Qi

Date sent for review: 2016-06-30 16:55

Date reviewed: 2016-07-18 18:38

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

An excellent review of cardiovascular disease and liver transplantation. It would read better if the manuscript were shortened and made more concise - it tends to ramble - and major points emphasized by BOLD SUBHEADINGS.



ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 28390

Title: Cardiovascular risk after OLT, a review of the literature and preliminary results of a prospective study

Reviewer's code: 00504392

Reviewer's country: Germany

Science editor: Yuan Qi

Date sent for review: 2016-06-30 16:55

Date reviewed: 2016-07-25 20:28

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

ESPS manuscript no: 28390 General The predominance of metabolic liver disease is made quite clear here. The preliminary data on the occurrence of metabolic problems is new and calling for interventions. Suggestions 1. The text is too long and many repetitions should be left out. Make the word count 50 percent and it is OK. 2. The debate on malignancies is underrepresented. 3. In table 2 the mycophenolate should be mentioned. This is metabolically neutral. Special The complete text needs improvement by native English speaking people. The treatment of choice for heart failure is a diuretic not a calcium channel blocker. Compare the new onset diabetes in liver patients with kidney transplant patients - where 25 % might be the prevalence. Distinguish between steroid minimizing and withdrawal - what is best ... ? The incidence of hepatitis C associated liver failure will dramatically decrease in the next years. The dipeptidyl-peptidase 4 inhibitors are attractive and even empagliflozin should be mentioned as an antidiabetic drug. Inter or intraventricular septum ... What are the nutritional rules ... vegetarian ... mediterranean .. The many references that were published before 2000 are superfluous. Table 3: Statins do increase not decrease the AUD



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of calcineurin inhibitors. And thiazides are not contraindicated as antihypertensives – also not in liver transplant patients.