

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 5788

Title: Cystatin C is a biomarker for prediction of acute kidney injury in acute-on-chronic liver failure patients

Reviewer code: 00054120

Science editor: Gou, Su-Xin

Date sent for review: 2013-09-27 12:22

Date reviewed: 2013-09-29 06:19

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<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"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

Scientifically sound article that requires some minor revision and editing. I did some editing and corrections on the article which I included in my review. There are few comments and questions to the authors that I have to add: 1- Did you try to check on the CysC levels in patients who recovered from the AKI? It may be a good idea to see how the CysC levels will behave during the recovery period. 2- There is no information about the sampling procedure for the healthy match-control group and the CHB group. 3- There is no information about the frequency of sampling , this should be stated clearly in the Method and Study Design section.

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 5788

Title: Cystatin C is a biomarker for prediction of acute kidney injury in acute-on-chronic liver failure patients

Reviewer code: 02511816

Science editor: Gou, Su-Xin

Date sent for review: 2013-09-27 12:22

Date reviewed: 2013-10-02 10:27

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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 type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input checked="" type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input checked="" type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

In the manuscript entitled "Cystatin C is a biomarker for prediction of acute kidney injury in acute-on-chronic liver failure patients", the authors presented the finding that, in case of acute-on-chronic liver failure, the predictive performance of serum CysC and eGFR calculated from CysC is superior to serum creatinine and the other parameters. The prospective observation is excellent. The data collected in this study contribute to our understanding of common rule in the ACLF, and the manuscript could be considered for publication with several revisions. I commented on you manuscript, please find the manuscript file I uploaded.

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 5788

Title: Cystatin C is a biomarker for prediction of acute kidney injury in acute-on-chronic liver failure patients

Reviewer code: 00503292

Science editor: Gou, Su-Xin

Date sent for review: 2013-09-27 12:22

Date reviewed: 2013-10-07 15:49

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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 type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<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"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

Abstract L2 Para 1 Need to state what ACLF is in full and the abbreviation in brackets as this is used for the first time. L12 Para 1 Remove the word "Meanwhile".. change positive to 'positively' and insert the word "the" before MELD. Need to state what MELD is to make it easier for the reader. L15 Para 1 Is the author referring to "liver" or kidney injury as AKI is "Acute kidney injury". Need to state this in full. L17 Para 1 Need to insert the word "of" before AKI. Core tip L 5 Para 1 Need to insert the word "who" before developed and remove the word "to". Introduction L4 Para 1 Change the word "cases" to "patients". L6 Para 1 "...dramatic deterioration and consequently a poor prognosis..." L6 Para 2 change the word "named" to "namely". L2 Para 2 Insert the word "patients" before undergoing. L10 Para 2 "..., but the data in ACLF patients is lacking" L3 Para 3 Change "determine to "determining" and remove the word "the". Clinical parameters L4 Para 1 Remove the words "... in the Central Clinical Laboratory of Beijing 302 Hospital". L5 Para 1 Insert the word "the" before modified. L8-11 The referencing is incorrectly cited. There are two formulae used for CysC-based GFR estimation viz. Hoek and EPI. Authors needs to explain why and which one is used in the rest of the study. Change sentences to read "CysC-based GFR estimation was calculated using the Hoek formula....". Statistical Analysis L1 Para 1 Change the word "with" to "using" RESULTS Clinical characteristics of enrolled patients L4 Para 1 "...16 females (28.6%) with a mean age of...." Insert the word "mean" after the word the in the next sentence. L6 Para 1 "All patients had...." remove the word "of" L7 Para 2. "The serum levels of CysC...". This should be in the section on methods. Remove the words "As shown" in the next sentence. Development of acute kidney injury L4 Para 1 "... increased compared to patients without AKI....." Discussion L1,2 Para 1. "that

are comparable to patients with sepsis." Remove the words "with those" L5 Para 1 "... which mediate circulatory and renal disturbances of liver failure." L3 Para 2 "However, Cr is an insensitive marker...." L11 Para 2 Replace the sentence "But the..." with "Data using CysC levels in ACLF patients are unavailable." L 1,2 Para 3 "In patients ..." this sentences does not make sense and needs to be rephrased. L5 Para 1 Remove the sentence "In our study....". L16 Para 1 Remove the words "..., which was a little...." and "as" and replace "before" with previously. Conclusion L2 Para 1 "The patients who developed AKI during hospitalisation"

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 5788

Title: Cystatin C is a biomarker for prediction of acute kidney injury in acute-on-chronic liver failure patients

Reviewer code: 00502830

Science editor: Gou, Su-Xin

Date sent for review: 2013-09-27 12:22

Date reviewed: 2013-10-13 12:03

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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"/> Existed	<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"/> No records	<input type="checkbox"/> Rejection
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		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

The authors reported that serum CysC level was significantly increased in acute-on chronic liver failure (ACLF) patients, the cut off value of serum CysC for prediction AKI in ACLF patients was 1.21 mg/L, and CysC-based eGFR more accurately represented renal function. The authors suggested that serum CysC levels could be used as an early prediction for AKI in nACLF. It's a fantastic manuscript. However, I have some comments on this manuscript. Major comments. 1. P. 8, line 15: The authors described that the patients with ACLF may have other types of renal dysfunction than HRS due to underlying circulatory abnormalities and sepsis. Please add new references to explain this. 2. P. 9, line 1-2: Why basal CysC-based eGFR was significantly lower in patients with AKI development? What is the reason of this fact? 3. Sample size is too small, because AKI occurred in only 8 patients. The authors should include limitation of this manuscript in discussion. Minor comment 1. P.9, line 2: Please change from AIK to AKI.