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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Critical Care Medicine

ESPS manuscript NO: 31104

Title: Characteristics of postintensive care syndrome in survivors of pediatric critical illness: A systematic review

Reviewer's code: 00646306

Reviewer's country: India

Science editor: Fang-Fang Ji

Date sent for review: 2016-11-02 16:52

Date reviewed: 2017-01-13 02:07

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

No comments



ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Critical Care Medicine

ESPS manuscript NO: 31104

Title: Characteristics of postintensive care syndrome in survivors of pediatric critical illness: A systematic review

Reviewer’s code: 00646241

Reviewer’s country: Germany

Science editor: Fang-Fang Ji

Date sent for review: 2016-11-02 16:52

Date reviewed: 2017-01-13 19:42

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

In their work, “Characteristics of Postintensive Care Syndrome in Survivors of Pediatric Critical Illness: A systematic review”, the authors, EA Herrup et al., present a nice and informative overview. The work is well written, based on a systematic literature review, and informative, however, some aspects should be clarified a bit more. Since the work is conducted based on a well structured, Cochrane-like process of information collection, the crucial parts of this should be clarified completely. In the introduction, the authors state that they included in the search terms such as postintensive care syndrome and post-ICU syndrome, as well as terms likely to return articles that had a discussion of the physical, cognitive and psychological morbidities associated with a pediatric critical care admission, such as quality of life, wellbeing, and others. The statement “and others” is unclear in this context. All important criteria should be given accurately, and there should be a hint to the table including all terms. This is particularly important since the concept of “post-ICU syndrome” summarizing a plethora of different problems is not yet established a standard term. In the introduction, it should be mentioned that a high proportion of children treated at an ICU suffer



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from pre-existing comorbidities which have a high impact on post-ICU problems. Regarding the results, it has to be stated that although the authors intended to perform a quantitative analysis summarizing data from numerous studies, most information given actually is the result of qualitative analysis of individual studies. This should be stated more clearly. Although qualitative of life had been in the focus of the study, there is no sub-heading analysing this parameter - which is not a sub-parameter of psychological or physical morbidity. Also, the authors find that post-traumatic stress disorder (PTSD) is a very relevant problem. However, this is not mentioned in the introduction or abstract. In the discussion, it should be analysed whether the high relevance of PTSD is caused by the fact that PTSD was one of the search terms. In my version of the paper, the figure showing the inclusion procedure is not appropriately reproduced.



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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Critical Care Medicine

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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"/> 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 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

Although there is a broad consensus on the need to identify and categorize physical, neurocognitive and psychological morbidities in reported prospective cohort studies of children who have survived critical illness, there are many new variables available for helping to determine the impact in PICS 'patients. Such new standards should have been included in the analysis of this paper to better understand the prognosis after the hospital discharge of such patients.