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ESPS Peer-review Report
Name of Journal: World Journal of Cardiology
ESPS Manuscript NO: 8417
Title: Are there ways to attenuate arterial calcification and improve cardiovascular outcomes in chronic kidney disease?
Reviewer code: 00503305
Science editor: Zhai, Huan-Huan
Date sent for review: 2013-12-28 17:01
Date reviewed: 2014-01-25 20:33

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[ ] Grade A (Excellent)	[ ] Grade A: Priority Publishing	Google Search:	[ ] Accept
[Y] Grade B (Very good)	[Y] Grade B: minor language polishing	[ ] Existed	[ ] High priority for publication
[ ] Grade C (Good)	[ ] Grade C: a great deal of language polishing	[ ] No records	[ ]Rejection
[ ] Grade D (Fair)	[ ] Grade D: rejected	BPG Search:	[Y] Minor revision
[ ] Grade E (Poor)		[ ] Existed	[ ] Major revision
		[ ] No records	

COMMENTS TO AUTHORS

Dear Sir, The article "Are there ways to attenuate arterial calcification and improve cardiovascular outcomes in chronic kidney disease?" is a good review article. Even though this article is similar to previously published article such as Cardiovascular risk and mineral bone disorder in patients with chronic kidney disease by Staude H, Jeske S, Schmitz K, Warncke G, Fischer DC. Kidney Blood Press Res. 2013;37(1):68-83 or Use of phosphate binders in chronic kidney disease by Ketteler M, Biggar PH. Curr Opin Nephrol Hypertens. 2013 Jul;22(4):413-2 and Hyperphosphataemia: treatment options by Malberti F.Drugs. 2013 May;73(7):673-88 but this article is more complete with more detail. However, authors should give more comparison on each treatment (maybe in table format) and give more specific treatment option for patients in each condition.

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ESPS Peer-review Report
Name of Journal: World Journal of Cardiology
ESPS Manuscript NO: 8417
Title: Are there ways to attenuate arterial calcification and improve cardiovascular outcomes in chronic kidney disease?
Reviewer code: 00503203
Science editor: Zhai, Huan-Huan
Date sent for review: 2013-12-28 17:01
Date reviewed: 2014-02-10 05:35

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[ ] Grade A (Excellent)	[ ] Grade A: Priority Publishing	Google Search:	[Y] Accept
[Y] Grade B (Very good)	[Y] Grade B: minor language polishing	[ ] Existed	[ ] High priority for publication
[ ] Grade C (Good)	[ ] Grade C: a great deal of language polishing	[ ] No records	
[ ] Grade D (Fair)		BPG Search:	[ ]Rejection
[ ] Grade E (Poor)	[ ] Grade D: rejected	[ ] Existed	[ ] Minor revision
		[ ] No records	[ ] Major revision

COMMENTS TO AUTHORS

Some new insights into mineral metabolism and the pathogenesis of arterial calcifications in chronic kidney disease patients could be presented in more detail and the relevant references could be quoted. Specifically: 1. Mineral metabolism in CKD. It has been shown that Klotho expression is reduced in the parathyroid glands and it is associated with residence to FGF23 action (to reduce PTH secretion) (Komaba H, et al. Kidney Int 77: 232, 2010; Galitzer H et al. Kidney Int 77: 211, 2010). Moreover, FGF23 levels were shown to predict the development of secondary hyperparathyroidism refractory to treatment (Nakanishi S et al. Kidney Int 67: 1171, 2005). 2. Pathogenesis of arterial calcifications. The role of FGF23/Klotho axis in the development of arterial calcifications is complex and the results of the relevant studies are inconsistent (Scialla JJ et al. Kidney Int 83: 1159, 2013).