

ESPS Peer-review Report

Name of Journal: World Journal of Cardiology

ESPS Manuscript NO: 8411

Title: Anti-hypertensive drugs in children and adolescents: Major clinical trials completed for pediatric labeling

Reviewer code: 00186017

Science editor: Gou, Su-Xin

Date sent for review: 2013-12-28 16:31

Date reviewed: 2014-01-05 12:47

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input checked="" 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"/> 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)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

In this excellent review, authors summarize the available data and experience supporting the use of antihypertensive drugs in children and adolescents diagnosed with essential hypertension with a particular focus on recent pediatric clinical trials. I have only minor comments: Please, add, in the Abstract and Introduction section, the sources of research as well as the key words that were used. Adding a column on Table 1 with the main side effects of the anti-hypertensive drugs should be of interest.

ESPS Peer-review Report

Name of Journal: World Journal of Cardiology

ESPS Manuscript NO: 8411

Title: Anti-hypertensive drugs in children and adolescents: Major clinical trials completed for pediatric labeling

Reviewer code: 00227683

Science editor: Gou, Su-Xin

Date sent for review: 2013-12-28 16:31

Date reviewed: 2014-01-06 09:27

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input checked="" 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 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)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

The paper reviews anti-hypertensive drugs in children and adolescents, including drugs for pediatric use approved by the US FDA according to findings of rigorous clinical trials in pediatric patient populations and less well studied but commonly used “older” pediatric antihypertensive drugs. Thus, subtitle “Major clinical trials completed for pediatric labeling” seems to be inaccurate and unnecessary due to the contents reviewed. For a long time, pediatricians have used “off-label” drugs to treat pediatric hypertension. This review can make pediatric cardiologists’ practice more evidence-based. The text should be concise. On the contrary, trial design, definition of pediatric hypertension, standards of inclusion and exclusion, endpoints, adverse events, discontinuation of drug use in pediatric clinical trials may be shown in table 2. In addition, can authors extract the special point of anti-hypertensive drugs use in children different from adults according to findings from these pediatric clinical trials?