

ESPS Peer-review Report

Name of Journal: World Journal of Critical Care Medicine

ESPS Manuscript NO: 4272

Title: Iatrogenic Pneumothorax Related to Mechanical Ventilation

Reviewer code: 00608221

Science editor: Song, Xiu-Xia

Date sent for review: 2013-06-25 14:53

Date reviewed: 2013-07-03 03:05

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)	<input type="checkbox"/> Grade D: rejected	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

This is a well written manuscript. In my opinion, this is an important topic to cover in the form of a review article. The authors describe our current understanding of iatrogenic pneumothorax related to mechanical ventilation. The authors describe epidemiology of pneumothorax associated with mechanical ventilation. In addition, the authors discussed postulated underlying pathophysiology and conditions that may predispose to pneumothorax during mechanical ventilation. I was very impressed with the section on investigations of pneumothorax and the inclusion of I would suggest that the authors strengthen to important message of the use of computed tomography as chest radiograph may not necessary distinguish between emphysematous bullae and pneumothorax. Hence insertion of intercostal chest drain into emphysematous bullae in patient who is mechanically ventilated may lead to catastrophic consequences. In addition, the section describing the use of transthoracic ultrasound would benefit from adding of the description of findings on M-mode in normal and in cases of pneumothorax. Overall this is an interesting review which describes in a novel way aspects of pneumothorax related to mechanical ventilation.

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Title: Iatrogenic Pneumothorax Related to Mechanical Ventilation

Reviewer code: 00608185

Science editor: Song, Xiu-Xia

Date sent for review: 2013-06-25 14:53

Date reviewed: 2013-07-05 09:51

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 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	BPG Search:	<input checked="" type="checkbox"/> Rejection
<input checked="" type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> Existed	<input type="checkbox"/> Minor revision
		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

Major points This manuscript was described regarding the pneumothorax related to mechanical ventilation. In the pulmonary barotraumas during mechanical ventilation, the mortality rate is high and the prompt diagnosis and treatment are required. In this manuscript core tip, the author described that "We should early diagnose pneumothorax and manage pneumothorax to reduce mortality and morbidity in the mechanical ventilated patients." However, the strategy for this did not demonstrate sufficiently. There are big problems about this manuscript. First, this manuscript was uneasy to read because there was no table. The author should organize the manuscript easy to read. Second, the contents in this manuscript were similar to the recent paper titled "Pulmonary barotrauma during mechanical ventilation" (see UpToDate www.uptodate.com authored by Robert C Hyzy). **Minor points** There are so many repeat sentences in this manuscript.