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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Critical Care Medicine

ESPS manuscript NO: 22859

Title: Corticosteroids for severe influenza pneumonia: A critical appraisal

Reviewer's code: 00035746

Reviewer's country: United Kingdom

Science editor: Shui Qiu

Date sent for review: 2015-10-02 09:43

Date reviewed: 2015-10-05 18:07

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 type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input checked="" 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 type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
		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

Thank you. I have a few suggestions: 1) Perhaps the paragraph on corticosteroid pharmacology could be shortened by a few sentences. I feel it is a bit too detailed. 2) The limitations of the retrospective observational studies should be discussed in more depth - what are the main reasons why we think they cannot produce a reliable answer? Also, what are their strengths? 3) Similarly the small RCT should be critiqued in greater depth.



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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Critical Care Medicine

ESPS manuscript NO: 22859

Title: Corticosteroids for severe influenza pneumonia: A critical appraisal

Reviewer's code: 00079570

Reviewer's country: France

Science editor: Shui Qiu

Date sent for review: 2015-10-02 09:43

Date reviewed: 2015-10-10 00:39

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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"/> The same title	<input type="checkbox"/> High priority for publication
<input 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 type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
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		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

The focus of this manuscript is to provide an update on the potential role (or absence of role) of corticosteroids in severe influenza pneumonia, summarizing current evidence available in the literature. The manuscript is well written and for the most part provides a valuable addition to the literature. It is co-authored by very well-known investigators in the field, reinforcing its value. The paper is really up-to-date and covers all aspects of this important topic, clarifying many issues that are often misunderstood by clinicians, particularly regarding how we can interpret the alterations found in the metabolism of corticosteroids in this setting. As such, this review will provide a useful guidance to a large audience and may improve the management of patients admitted to the ICU for severe influenza pneumonia.