PEER-REVIEW REPORT

Name of journal: World Journal of Critical Care Medicine

Manuscript NO: 44983

Title: Neutrophil-lymphocyte ratio: A prognostic tool in patients with in-hospital cardiac arrest

Reviewer's code: 03491558

Reviewer's country: Italy

Science editor: Jia-Ping Yan

Date sent for review: 2018-12-13

Date reviewed: 2018-12-13

Review time: 7 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
[ ] Grade A: Excellent	[Y] Grade A: Priority publishing	[ ] Accept (High priority)	Peer-Review:
[Y] Grade B: Very good	[ ] Grade B: Minor language polishing	[ ] Accept (General priority)	[Y] Anonymous
[ ] Grade C: Good	[ ] Grade C: A great deal of language polishing	[Y] Minor revision	[ ] Onymous
[ ] Grade D: Fair	[ ] Grade D: Rejection	[ ] Major revision	Peer-reviewer's expertise on the topic of the manuscript:
[ ] Grade E: Do not publish		[ ] Rejection	[ ] Advanced
			[Y] General
			[ ] No expertise
			Conflicts-of-Interest:
			[ ] Yes
			[Y] No

SPECIFIC COMMENTS TO AUTHORS

This manuscript focused on a significant topic. There is a dire need to identify available, inexpensive and robust biomarkers that can clinically be helpful to determine outcomes/mortality after ROSC. The authors should mention the retrospective Weiser'

study on Resuscitation (Resuscitation 2017, 116:49-55) conducted on patients with out of hospital cardiac arrest. Other suggestions to the authors 1. Please, add number of patients in abstract 2. The findings on figure 2 should be better discussed (significance on PEA group) 3. Please, emphasize that the study concerns in-hospital mortality in both title and abstract.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

[   ] The same title

[   ] Duplicate publication

[   ] Plagiarism

[Y] No

BPG Search:

[   ] The same title

[   ] Duplicate publication

[   ] Plagiarism

[Y] No

PEER-REVIEW REPORT

Name of journal: World Journal of Critical Care Medicine

Manuscript NO: 44983

Title: Neutrophil-lymphocyte ratio: A prognostic tool in patients with in-hospital cardiac arrest

Reviewer's code: 00502743

Reviewer's country: Argentina

Science editor: Jia-Ping Yan

Date sent for review: 2018-12-29

Date reviewed: 2018-12-31

Review time: 4 Hours, 2 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
[ ] Grade A: Excellent	[ ] Grade A: Priority publishing	[ ] Accept (High priority)	Peer-Review:
[ ] Grade B: Very good	[Y] Grade B: Minor language polishing	[Y] Accept (General priority)	[Y] Anonymous
[Y] Grade C: Good	[ ] Grade C: A great deal of language polishing	[ ] Minor revision	[ ] Onymous
[ ] Grade D: Fair	[ ] Grade D: Rejection	[ ] Major revision	Peer-reviewer's expertise on the topic of the manuscript:
[ ] Grade E: Do not publish		[ ] Rejection	[ ] Advanced
			[Y] General
			[ ] No expertise
			Conflicts-of-Interest:
			[ ] Yes
			[Y] No

SPECIFIC COMMENTS TO AUTHORS

It would be great to be able to consider - according to the authors - that the Neutrophil-Lymphocyte Ratio (NLR) is a reliable prognostic marker in patients with intra-hospital cardiac arrest. However,we must also remember that there are many

other nosological conditions capable of causing changes in this marker (for example, S beta-100 has shown remarkable specificity in cases associated with trauma or cranio-encephalic damage, very much greater than 73% reported for the NLR). Anyway, it will be very useful to keep in mind this NLR marker while progressing towards greater prognostic specificity in patients with intra-hospital cardiac arrest.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

[   ] The same title

[   ] Duplicate publication

[   ] Plagiarism

[Y] No

BPG Search:

[   ] The same title

[   ] Duplicate publication

[   ] Plagiarism

[Y] No

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
[ ] Grade A: Excellent	[Y] Grade A: Priority publishing	[ ] Accept (High priority)	Peer-Review:
[ ] Grade B: Very good	[ ] Grade B: Minor language polishing	[ ] Accept (General priority)	[Y] Anonymous
[Y] Grade C: Good	[ ] Grade C: A great deal of language polishing	[Y] Minor revision	[ ] Onymous
[ ] Grade D: Fair	[ ] Grade D: Rejection	[ ] Major revision	Peer-reviewer's expertise on the topic of the manuscript:
[ ] Grade E: Do not publish		[ ] Rejection	[Y] Advanced
			[ ] General
			[ ] No expertise
			Conflicts-of-Interest:
			[ ] Yes
			[Y] No

SPECIFIC COMMENTS TO AUTHORS

This manuscript focused on finding a simple and rapid prognostic marker for the patients with IHCA, which is a significant study. I make the following recommendations:1) references need to be updated. 2) It would be better to describe the

results section in detail. 3) Horizontal axis (types of cardiac rhythm) should be formatted consistently in Figure2.

INITIAL REVIEW OF THE MANUSCRIPT

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[   ] The same title

[   ] Duplicate publication

[   ] Plagiarism

[Y] No

BPG Search:

[   ] The same title

[   ] Duplicate publication

[   ] Plagiarism

[Y] No

PEER-REVIEW REPORT

Name of journal: World Journal of Critical Care Medicine

Manuscript NO: 44983

Title: Neutrophil-lymphocyte ratio: A prognostic tool in patients with in-hospital cardiac arrest

Reviewer's code: 03106792

Reviewer's country: United Kingdom

Science editor: Jia-Ping Yan

Date sent for review: 2018-12-29

Date reviewed: 2019-01-03

Review time: 12 Hours, 5 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
[ ] Grade A: Excellent	[ ] Grade A: Priority publishing	[ ] Accept (High priority)	Peer-Review:
[ ] Grade B: Very good	[Y] Grade B: Minor language polishing	[ ] Accept (General priority)	[Y] Anonymous
[ ] Grade C: Good	[ ] Grade C: A great deal of language polishing	[ ] Minor revision	[ ] Onymous
[Y] Grade D: Fair	[ ] Grade D: Rejection	[Y] Major revision	Peer-reviewer's expertise on the topic of the manuscript:
[ ] Grade E: Do not publish		[ ] Rejection	[Y] Advanced
			[ ] General
			[ ] No expertise
			Conflicts-of-Interest:
			[ ] Yes
			[Y] No

SPECIFIC COMMENTS TO AUTHORS

The findings are relatively novel although tested in a very small population. The study may serve as hypothesis generating. The limitations are discussed. The article is of limited interest for such limitation. Otherwise it is well-written. How the authors

derived the sample size should be explained. Were the retrieved data collected electronically or on paper chart? The abstract needs to be more focused in its introduction. It seems unclear the way the cut-off is derived reading the abstract. Previous research? From the actual data? From the main document it seems the latter, then this part should be inserted in the abstract results rather than in the methods. Throughout the manuscript please use Target temperature management rather than therapeutic hypothermia. Also some NLR are not abbreviated   In the discussion please do not report the results of univariate analysis but rather of the multivariate since these are more robust. Line 6 of discussion delete "for". It would be useful for readers if the authors reports the sensitivity/specificity of other markers (i.e. NSE and S-100)

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[   ] Plagiarism

[Y] No