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# PEER-REVIEW REPORT

Name of j	ournal: World	Journal of	Transplantation
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Manuscript NO: 77425

Title: Vitamin D deficiency may predispose patients to increased risk of kidney

transplant rejection

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05573866 Position: Peer Reviewer Academic degree: MD

**Professional title:** Assistant Professor

**Reviewer's Country/Territory:** Egypt

**Author's Country/Territory:** Turkey

Manuscript submission date: 2022-04-29

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-04-29 11:47

Reviewer performed review: 2022-05-06 16:19

**Review time:** 7 Days and 4 Hours

Scientific quality	[ ] Grade A: Excellent [Y] Grade B: Very good [ ] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish	
Language quality	[ ] Grade A: Priority publishing [ Y] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection	
Conclusion	[ ] Accept (High priority) [ ] Accept (General priority) [ Y] Minor revision [ ] Major revision [ ] Rejection	
Re-review	[Y]Yes [ ]No	



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Peer-reviewer statements

Peer-Review: [Y] Anonymous [] Onymous

Conflicts-of-Interest: [ ] Yes [Y] No

# SPECIFIC COMMENTS TO AUTHORS

Authors investigated the association between the serum 25(OH) vitamin D, as and immunomodulatory factor can predispose transplant recipients to rejection and chronic allograft nephropathy rates. The current manuscript is interesting and well-structured. However, there are numerous comments and questions the authors should address, all were detailed below: Major concerns; • Authors didn't specify the inclusion criteria for selecting patients included in this study. • In page 6: authors mentioned "Biopsy specimens were considered adequate if they had ≥10 glomeruli and two arteries; patients with inadequate biopsy specimens were excluded from the study". What was the number of patients that were excluded due to defective specimens? • Did their data were removed from all results? • Did their number were considered from the totally excluded patients that they didn't meet the inclusion criteria? • Section of materials and methods: showed no details about the detection kits used for estimation of all biochemical parameters? • What was the criteria for selecting donors for kidney transplantation? • No key words



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Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03761355 Position: Editorial Board

Academic degree: FASN, FRCP, MD

**Professional title:** Professor

Reviewer's Country/Territory: United States

**Author's Country/Territory:** Turkey

Manuscript submission date: 2022-04-29

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-04-29 11:11

Reviewer performed review: 2022-05-07 22:39

**Review time:** 8 Days and 11 Hours

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [ ] Grade C: Good [ Y] Grade D: Fair [ ] Grade E: Do not publish	
Language quality	[ ] Grade A: Priority publishing [Y] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection	
Conclusion	[ ] Accept (High priority) [ ] Accept (General priority) [ Y] Minor revision [ ] Major revision [ ] Rejection	
Re-review	[Y]Yes []No	



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Peer-reviewer

Peer-Review: [Y] Anonymous [ ] Onymous

statements Conflicts-of-Interest: [ ] Yes [Y] No

# SPECIFIC COMMENTS TO AUTHORS

In this single center retrospective study (n=52), the authors evaluated the association between vitamin D deficiency and risk for kidney transplant rejection. In multivariable analysis, vitamin D deficiency was not found to be an independent predictor of kidney transplant rejection. Overall, the manuscript is written well. I have the following comments/critiques: 1. There have been previous studies that tried to answer the same question. So the concept is not novel. Main limitation of the current study is the retrospective design and small sample size. 2. Why were patients in the first year of transplant excluded? Most of the acute rejections usually happen during the first year after transplant. 3. What time point was vitamin D level measured? How many patients were on vitamin D replacement? 4. It was not surprising to see that serum phosphorus and PTH levels were higher in rejection group since those patients had lower GFR which can stimulate PTH release and reduce renal phosphorus clearance.