

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Transplantation

ESPS manuscript NO: 20557

Title: Clinical and pathological features of kidney transplant patients with concurrent polyomavirus nephropathy and rejection-associated endarteritis

Reviewer's code: 00504146

Reviewer's country: Canada

Science editor: Fang-Fang Ji

Date sent for review: 2015-06-11 22:49

Date reviewed: 2015-06-16 06:14

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input checked="" 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"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		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

Some minor wordings are suggested: 1. Title: Change "7" to "kidney transplant." 2. In abstract, change the wordings of the conclusion - as mentioned in the paper, only the case report was found in literature, so there is no comparison between the number (7.4%) in this paper and the number(?) in literature. Authors should draw a new conclusion based on the new finding.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Transplantation

ESPS manuscript NO: 20557

Title: Clinical and pathological features of kidney transplant patients with concurrent polyomavirus nephropathy and rejection-associated endarteritis

Reviewer's code: 00521885

Reviewer's country: United States

Science editor: Fang-Fang Ji

Date sent for review: 2015-06-11 22:49

Date reviewed: 2015-07-09 06:36

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 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 checked="" type="checkbox"/> Rejection
<input checked="" 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

The authors describe a series of cases with PVN and arteritis and state that the 7.4% incidence is higher than expected. To put this finding in perspective, the incidence of arteritis in the rejection biopsies over the 11 year study period should be presented. The manuscript is poorly written with contradictions between the text and figures. For example, page 9, para 2 states that 3 patients had reduction of immunosuppression PRIOR to biopsy. These patients can not be identified in Table 2, while Table 1 says there are 4 such patients. Figure 2 shows only 3 points at the 12 month point. Patients with simultaneous PVN and arteritis are claimed to do better, but the simultaneous detection may not be the critical determinant. It may just be the reduction of immunosuppression for a longer period or to a greater degree. Data is not presented in sufficient detail to allow judgment as to whether or not this is so. Changes (dose and duration) before and after diagnosis should have been presented in the same table to prevent confusion. Previously published literature should be more carefully for prior cases with arteritis and PVN and the clinical course described.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Transplantation

ESPS manuscript NO: 20557

Title: Clinical and pathological features of kidney transplant patients with concurrent polyomavirus nephropathy and rejection-associated endarteritis

Reviewer's code: 00227610

Reviewer's country: Norway

Science editor: Fang-Fang Ji

Date sent for review: 2015-06-11 22:49

Date reviewed: 2015-07-21 18:19

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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"/> The same title	<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"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		[Y] No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		[Y] No	

COMMENTS TO AUTHORS

The manuscript by McGregor et al. studies the concurrency between polyomavirus nephropathy and endarteritis in 94 kidney transplant patients. They found 7 patients (all male) that developed both PVN and endarteritis. In four of them endarteritis arose after reduction of immunosuppression, and three of them lost their grafts. Patients that got PVN and endarteritis after lowered immunosuppression had high serum creatinine levels and Banff interstitial inflammation and tubulitis scores. Minor comments 1. The International Committee on Taxonomy of Viruses recommends using the abbreviations BKPyV and JCPyV for BKV and JCV, respectively [Johne R et al., Arch Virol 2011;156:1627-1634]. 2. How many of the 94 kidney transplant patients that developed PVN were male? Because all the patients that developed PVN and endarteritis were male, it may seem that gender may play a role, unless the male sex was overrepresented in their 94 renal transplant patients. 3. Maybe the abbreviations ATG (page 9, 7th line from the bottom), IVIG (first line on page 10), and DSA (line 5, page 11) should be explained the first time they are used. 4. The labels A and B in Figure 1 are lacking. 5. Legend of Figure 1 should be improved.