ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Transplantation
ESPS manuscript NO: 26787
Title: Stabilization of estimated GFR in kidney transplantation from deceased donors with acute kidney injuries
Reviewer's code: 00289581
Reviewer's country: United States
Science editor: Fang-Fang Ji
Date sent for review: 2016-04-27 17:23
Date reviewed: 2016-05-08 10:28

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
[ ] Grade A: Excellent	[ ] Grade A: Priority publishing	Google Search:	[ ] Accept
[ ] Grade B: Very good	[Y] Grade B: Minor language	[ ] The same title	[ ] High priority for
[Y] Grade C: Good	polishing	[ ] Duplicate publication	publication
[ ] Grade D: Fair	[ ] Grade C: A great deal of	[ ] Plagiarism	[ ] Rejection
[ ] Grade E: Poor	language polishing	[Y] No	[Y] Minor revision
	[ ] Grade D: Rejected	BPG Search:	[ ] Major revision
		[ ] The same title	
		[ ] Duplicate publication	
		[ ] Plagiarism	
		[Y] No	

COMMENTS TO AUTHORS

Stabilization of estimated GFR in kidney transplantation from deceased donors with acute kidney injuries   Punlop Wiwattanathum, Atiporn. Ingsathit, Surasak Kantachuvesiri,   Vasant Sumethkul. Overall, this is a very important topic of high priority. Specifics: Page 6 I would take out the definition of AKI in the introduction. You define in methods, it is not needed here. Page 6 Need to include total charts reviewed and which were excluded. Why did you include 111 patients? Page 6 Need to include dates of study, this may influence the immunosuppression regimen used. Was regression analysis done to include the different Induction and Maintenance immunosuppression? Why did not the donors have pre-implantation renal biopsies?   Would discuss the decrease eGFR in ECD in more detail, this is an important finding in this study.   Figure 1.   Where is the line for AKI? Need to get rid of the white space, change the axis. Figure 2.   Need to get rid of the white space and change the axis. Both Figures, would include graphics that are more varied.

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		[Y] No	

COMMENTS TO AUTHORS

This is a timely and interesting work addressing whether kidney transplantation with AKI kidney have significant difference on outcomes. However, I have several minor concerns with this work. 1. The authors used logistic regression analysis, but why not using Cox regression analysis since the outcome is survival data. also, the model building strategy is not explicitly stated in the statistical analysis section. Some references for model variable selection may be helpful for the authors (Ann Transl Med. 2016 Apr;4(7):136. doi: 10.21037/atm.2016.03.35. Ann Transl Med. 2016 Mar;4(6):111. doi: 10.21037/atm.2016.02.15.). 2. How eGFR was estimated? Please provide reference for doing so. 3. AKIN criteria have limitations because it is based on serum creatinine and urine output, and this is most commonly used in critical care setting. Are there some other biomarkers available for donors? Such as cyctatin C, NGAL? These biomarkers have potential to better reflect kidney injury than serum creatinine. If they are not available, these points can be discussed in the discussion. Some references may be helpful (Heart Lung Vessel. 2015;7(1):64-73. Am J Kidney Dis. 2011 Sep;58(3):356-65. doi: 10.1053/j.ajkd.2011.02.389.).   4. Some abbreviations in table 1 is not expanded

in the footnote. 5. In table 4, it is the best to report Odds ratio for logistic regression model. Furthermore, the eGFR is a continuous variable that can be addressed with linear regression model, why use logistic regression? How eGFR was transformed to a binary variable?　6. There are three groups in figure 1, but lines only shows two groups. Are any two of them overlapped?

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Transplantation
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Science editor: Fang-Fang Ji
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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
[ ] Grade A: Excellent	[Y] Grade A: Priority publishing	Google Search:	[ ] Accept
[ ] Grade B: Very good	[ ] Grade B: Minor language polishing	[ ] The same title	[ ] High priority for publication
[Y] Grade C: Good	[ ] Grade C: A great deal of language polishing	[ ] Duplicate publication	[ ] Rejection
[ ] Grade D: Fair	[ ] Grade D: Rejected	[ ] Plagiarism	[Y] Minor revision
[ ] Grade E: Poor		[Y] No	[ ] Major revision
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		[Y] No	

COMMENTS TO AUTHORS

The authors compared outcomes of kidney transplant among from deceased donors with AKI, from standard criteria donors, and from expanded criteria donors, showed that transplantation from deceased donors with AKI had comparable outcome compared to standard criteria donors, and concluded that deceased donors with AKI are important resources of organ for kidney transplantation. The paper is well-written and has valuable information. But some abbreviations were used without full spelling at the first presentation.   Abstract   1. page 2, line 15: "DDKT" should be changed to "deceased donor kidney transplantation" 2.   page 2, line 15: "PRA" should be changed to "panel-reactive antibody"   Materials and methods 3. page 6, line 12: "DDKT" should be changed to "deceased donor kidney transplantation (DDKT)"   4. page 6, line 14: "PRA" should be changed to "panel reactive antibodies (PRA)" 5. page 7, line 12: "DGF" should be changed to "delayed graft function (DGF)"

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Transplantation
ESPS manuscript NO: 26787
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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
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COMMENTS TO AUTHORS

The article is well written and relevant. Please do spell check as there are some spelling mistakes.