

## ESPS PEER-REVIEW REPORT

**Name of journal:** World Journal of Transplantation

**ESPS manuscript NO:** 29572

**Title:** Acute antibody-mediated rejection after intestinal transplantation

**Reviewer's code:** 00502797

**Reviewer's country:** Greece

**Science editor:** Fang-Fang Ji

**Date sent for review:** 2016-08-23 14:40

**Date reviewed:** 2016-09-09 01:47

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 checked="" 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

This is a well written, well designed retrospective review study on acute antibody-mediated rejection (ABMR) after intestinal transplantation, put through an electronic analysis of medical records of 18 patients diagnosed with ABMR out of 175 liver-free small bowel and modified multivisceral graft transplantations, during a 7-year period. Major comments: 1) The authors report that acute antibody-mediated rejection (ABMR) is among the most important barriers to improving long-term intestinal transplantation outcomes. In the multivariate analysis also showed that the high levels of panel reactive antibody (PRA) was identified to be a significant independent risk factor for graft lost and rejection episodes. Authors from the same unit have investigated in the past on the role of preformed donor-specific antibodies (DSAs) as a barrier to isolated intestinal transplantation (ITx) and concluded that it remains ambiguous. Also reported that a positive cross-match has not been a contraindication to ITx. In the paper is not reported the cross-match status of the transplant patients. Since you showed that the high levels of PRA was identified to be a significant independent risk factor for graft lost and rejection episodes, I am wondering if a pre-treatment in high PRA/cross-match positive patients would be an effective approach to lowering the rates of rejection



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and graft lost. 2) in Methods you report that : "No Patients received plasmapheresis or anti-B cell treatment for ABMR". Do you think that B-cell depletion, or plasmapheresis as pre-treatment would help to lowering the rates of rejection and graft lost.

## ESPS PEER-REVIEW REPORT

**Name of journal:** World Journal of Transplantation

**ESPS manuscript NO:** 29572

**Title:** Acute antibody-mediated rejection after intestinal transplantation

**Reviewer's code:** 02520845

**Reviewer's country:** Croatia

**Science editor:** Fang-Fang Ji

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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 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 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 checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
	<input type="checkbox"/> Grade D: Rejected	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

ESPS Manuscript NO: 29572 Title: Acute antibody-mediated rejection after intestinal transplantation  
This retrospective study described the acute antibody-mediated rejection (ABMR) after intestinal transplantation - author's home institution experience associated with steps considering the incidence, risk factors and clinical outcome. Using proposed diagnostic parameters for ABMR they explore the potential underlying mechanisms and potential prognostic factors for ABMR which could help to appropriate treating and preventing the rejection. The title accurately reflects the major topic and contents of the study. The study is well designed and described. The text is accompanied with appropriated tables. The figures are not good quality so I suggest improving the quality of figures. In conclusion, this is a very interesting study which provides a view of the problem of acute antibody-mediated rejection after intestinal transplantation.