

## ESPS PEER REVIEW REPORT

**Name of journal:** World Journal of Nephrology

**ESPS manuscript NO:** 10472

**Title:** Retrograde Intrarenal Surgery in Pediatric Patients

**Reviewer code:** 02874819

**Science editor:** Ling-Ling Wen

**Date sent for review:** 2014-04-02 22:06

**Date reviewed:** 2014-04-12 21:51

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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"/> Existing	<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"/> No records	<input type="checkbox"/> Rejection
<input checked="" type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Existing	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No records	<input checked="" type="checkbox"/> Major revision

## COMMENTS TO AUTHORS

Comments to authors The work is clinically relevant given the possibility of recurrence and increasing incidence of stones disease in childhood. This term should be better specified Ho: YAG (Holmium:YAG). There is no specific mention to the pathogenesis of stones in the assessment of efficacy and recurrence of stones disease.

## ESPS PEER REVIEW REPORT

**Name of journal:** World Journal of Nephrology

**ESPS manuscript NO:** 10472

**Title:** Retrograde Intrarenal Surgery in Pediatric Patients

**Reviewer code:** 02887073

**Science editor:** Ling-Ling Wen

**Date sent for review:** 2014-04-02 22:06

**Date reviewed:** 2014-04-23 05:46

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<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"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Existing	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

## COMMENTS TO AUTHORS

This is a very well-written and presented paper of a relatively new and exciting management of renal stones in children. The authors examined studies involving the RIRS procedure in pediatric patients and compared the results of those studies with those from other techniques. We really don't know some of the long-term effects on kidneys relating to SWL but we are aware of possible risks to adult patients as well as problems in adults with stone fragments being transferred sub-urothelially instead of cleared. Some patients present with chronic pain and other problems that may relate to non-cleared fragments, and in many centers, SWL is falling out of favor for treating adult stones. If this should occur in the pediatric age group, it is good to know that RIRS has a high success rate in the treatment of renal calculi. The conclusion of this study is very important for nephrologists and urologists, so I feel that this paper should be published. I congratulate the authors for their work.

## ESPS PEER REVIEW REPORT

**Name of journal:** World Journal of Nephrology

**ESPS manuscript NO:** 10472

**Title:** Retrograde Intrarenal Surgery in Pediatric Patients

**Reviewer code:** 00341535

**Science editor:** Ling-Ling Wen

**Date sent for review:** 2014-04-02 22:06

**Date reviewed:** 2014-05-02 20:34

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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"/> Existing	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> Existing	<input checked="" type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

## COMMENTS TO AUTHORS

Resorlu and coworkers reviewed treatment modalities for urinary tract stone in childhood. The review is comprehensive and covers percutaneous nephrolithotomy, retrograde intrarenal surgery, shock wave lithotripsy and laparoscopic stone surgery highlighting retrograde intrarenal surgery issues. A slightly different order should be provided with a description of the different techniques providing an additional table and schemes for each procedure. The outcome data comparison should follow thereafter also acknowledging advantages or disadvantages of a certain method. Finally, a discussion on differential therapeutic considerations should provide the reader with a guidance on which technique to use for a given clinical situation. A language edition is required.

## ESPS PEER REVIEW REPORT

**Name of journal:** World Journal of Nephrology

**ESPS manuscript NO:** 10472

**Title:** Retrograde Intrarenal Surgery in Pediatric Patients

**Reviewer code:** 02896971

**Science editor:** Ling-Ling Wen

**Date sent for review:** 2014-04-02 22:06

**Date reviewed:** 2014-05-03 01:22

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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"/> Existing	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Existing	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No records	<input checked="" type="checkbox"/> Major revision

## COMMENTS TO AUTHORS

This review manuscript written by Berkan Resorlu et al summarized the retrograde intrarenal surgery for urinary tract stone in pediatric patients. The authors concluded that the success rate of RIRS has increased and indications for use have widened. In fact, as the technology was improved and the lower complication rate was identified, not only in the pediatric patients, but also in the adult patients, indications for use of RIRS have widened. The reviewer agrees with the conclusion. However, the manuscript needs to be revised. First, the references are not the latest and need to be renewed. Second, when performed by experienced endourologists in big urinary tract stone center, PNL is still a safe and effective procedure in pediatric patients for the removal of renal calculi. Therefore, the reviewer suggests the author summarized the latest references about the complications of PNL in pediatric patients, like the Table 1. Third, using the Clavien-Dindo Classification to describe and compare the complications.