

**ESPS Peer-review Report****Name of Journal:** World Journal of Nephrology**ESPS Manuscript NO:** 11892**Title:** T-cell ageing in end-stage renal disease patients; assessment and clinical relevance**Reviewer code:** 00503199**Science editor:** Fang-Fang Ji**Date sent for review:** 2014-06-11 14:15**Date reviewed:** 2014-06-18 01:53

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"/> Existed	<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)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

**COMMENTS TO AUTHORS**

Nice short review suitable for publication. Just a minor comment: In P. 15 the authors can add that although bardoxolone may attenuate T-cell ageing in ESRD patients, its clinical use is restricted due to cardiovascular side effects (Beacon Trial)

# ESPS Peer-review Report

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

**ESPS Manuscript NO:** 11892

**Title:** T-cell ageing in end-stage renal disease patients; assessment and clinical relevance

**Reviewer code:** 00504668

**Science editor:** Fang-Fang Ji

**Date sent for review:** 2014-06-11 14:15

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CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> [ Y] Accept
<input type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> [ Y] Grade B: minor language polishing	<input type="checkbox"/> [ ] Existed	<input type="checkbox"/> [ ] High priority for publication
<input type="checkbox"/> [ Y] 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"/> [ ] Existed	<input type="checkbox"/> [ ] Major revision
		<input type="checkbox"/> [ ] No records	

# COMMENTS TO AUTHORS

GENERAL COMMENTS 1. To apply the assessment of T cell age in renal transplantation with treatment of immunosuppressant, the relation between the age of T cell and immune rejection should be evaluated. How can you determine the dose amount of immunosuppressant on the age of T cell when you transplant the kidney to patient? 2. ESRD patient can be susceptible for infection based on your explanation of T cell aging. However there was no mention on the immunological strategy for overcoming the infection. 3. T cell ageing can be the important role on transplantation in ESRD patient for the reducing immunosuppressant. However, there are another immune cell such as B cell, macrophage and dendritic cell. So, the explanation of effect or role of these immune cells is required in ESRD patient. Furthermore, the explanation of effect or role of these immune cells in ESRD patient with T cell aging is required. 4. In page 3, it would be better to describe the full words of the abbreviation, TREC. In page 8, what is EMRA? Please describe the details of EMRA and the full words of the abbreviation, EMRA. In page 15, treatment with IL- => IL-7 ? 5. There are several sentences to be corrected in grammar. ex) A. (page 5, line 22) CD28 plays an important role in the activation of T cells and a loss of CD28 can result in insufficient activation and shorter replicative lifespan and a higher toxicity. => CD28 plays an important role in the activation of T cells and a loss of CD28 can result in insufficient activation, shorter replicative lifespan and a higher toxicity. B. (page 10, line 7) Progressive loss of renal function was highly correlated with a lack of IL-7 and a loss of na?ve T cells and an increase in terminally differentiated CD8+ T cells. => Progressive loss of renal function was highly correlated with a lack of IL-7, a loss of na?ve T cells and an increase in terminally differentiated CD8+ T cells C. (page 15, line 7) (Nrf2) which is an is an => (Nrf2) which is an 6. Please



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uniform the reference style in the text. (position of comma) A.  $Ie > (12,13)$ . or  $.(12,13)$  SPECIFIC COMMENTS 1. In the part of '13 page-Premature T cell ageing and kidney transplantation', you mentioned KLOTHO gene for T cell aging. However, based on your explanation KLOTHO gene is not related with T cell aging directly. And there might be another genes related with ageing. So, I recommend you more explanation on genes which are related with T cell ageing. 2. You mentioned 'Normal ageing is associated with, epigenetic changes in HSC'. In your manuscript, you focused on T cell aging in ESRD patients. T cell is originated from HSC. By this reason, I suggest the requirement of analyzing the epigenetic status of HSC in ESRD patient. 3. In page 11, Please add references about the reason that increased susceptibility for apoptosis is associated with a loss of antigen-specific T cells