

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Nephrology

ESPS manuscript NO: 10816

Title: RELATIONSHIP OF MTHFR GENE POLYMORPHISMS WITH RENAL AND CARDIAC DISEASE

Reviewer code: 00503254

Science editor: Ling-Ling Wen

Date sent for review: 2014-04-21 22:58

Date reviewed: 2014-05-12 12:35

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

In this paper, the authors reported that MTHFR C677C>T and A1298A>C genetic polymorphisms are associated with renal function or left ventricular hypertrophy. The concept is clinically interesting, but there are some points that need to be addressed. Major comment They reported that the subjects were 630 Italians. However, they described that 94 of them were MTHFR C677CC (wild-type), 118 were MTHFR C677CT (heterozygous), and 104 were MTHFR C677TT (homozygous) according to MTHFR genotype. And they also stated that 80 were MTHFR A1298CC (homozygous), 76 were MTHFR A1298AC (heterozygous), and 158 were MTHFR A1298AC / C677CT (compound heterozygous). I think that the 630 subjects each have a genotype with MTHFR polymorphism. They should clarify this point. Minor comments 1) Although they investigated the relationship between MTHFR polymorphism and CA125 or CA15-3, there are sex differences in the prevalence of CA125 or CA15-3 positivity. Therefore they should adjust for sex in those analyses. 2) When using abbreviations, they should write the full term first and then use the abbreviation. 3) They should cite a reference for Simpson's formula. 4) I can't understand the meaning of control. Do the subjects in the control group have normal renal function? 5) They should place the figure titles below the figures. 6) Table1 is not adequate because the right edge is lost.



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ESPS PEER REVIEW REPORT

Name of journal: World Journal of Nephrology

ESPS manuscript NO: 10816

Title: RELATIONSHIP OF MTHFR GENE POLYMORPHISMS WITH RENAL AND CARDIAC DISEASE

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CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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"/> 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	BPG Search:	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

The manuscript could be cut short in some parts (e.g. "Methods").

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Nephrology

ESPS manuscript NO: 10816

Title: RELATIONSHIP OF MTHFR GENE POLYMORPHISMS WITH RENAL AND CARDIAC DISEASE

Reviewer code: 00502999

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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"/> Accept
<input 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 checked="" type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> No records	<input checked="" type="checkbox"/> Rejection
<input checked="" type="checkbox"/> Grade D: Fair		BPG Search:	
<input type="checkbox"/> Grade E: Poor	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Existing	<input type="checkbox"/> Minor revision
		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

The title of the present paper written by Francesca Trovato et al is about the RELATIONSHIP OF MTHFR GENE POLYMORPHISMS WITH RENAL AND CARDIAC DISEASE. Major issues: The conclusion at which the authors arrive has no relationship with the title of the study. Stating that these MTHFR polymorphisms could have a protective role on renal function cannot be drawn from this type of study, mainly due to the low number of patients on dialysis; moreover, many of the CKD patients in stages III and IV may have died before entering dialysis, a probable fact that has not been studied. Finally, hyperhomocysteinemia may cause thrombotic or endothelial and vascular damage independently of these polymorphisms, as many other factors are required to be present for homocysteine to gain relevance in a pathological role. Minor issues: The abstract lacks of any organizational structure. It appears that the Background (not entitled) comprises more than 50% of this section. The Overview (Introduction) is too long and is in part diverted from the aim of the study, which is not well stressed in the Abstract. The Methods section is not organized. The Discussion is half the length of the Overview. Reference 46 is incomplete.