

## ESPS JOURNAL EDITOR-IN-CHIEF'S REVIEW REPORT

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

**ESPS manuscript NO:** 20757

**Title:** Imaging-based diagnosis of acute renal allograft rejection

**Journal Editor-in-Chief (Associate Editor):** Maurizio Salvadori

**Country:** Italy

**Editorial Director:** Xiu-Xia Song

**Date sent for review:** 2015-09-28 14:36

**Date reviewed:** 2015-09-29 22:24

ACADEMIC CONTENT EVALUATION	LANGUAGE QUALITY EVALUATION	CONCLUSION
[ ] Grade A: Excellent	[ ] Grade A: Priority publishing	[ ] Accept
[ ] Grade B: Very good	[ ] Grade B: Minor language polishing	[ ] High priority for publication
[ ] Grade C: Good	[ Y] Grade C: A great deal of language polishing	[ Y] Revision
[ Y] Grade D: Fair		
[ ] Grade E: Poor	[ ] Grade D: Rejected	[ ] Rejection

### JOURNAL EDITOR-IN-CHIEF (ASSOCIATE EDITOR) COMMENTS TO AUTHORS

The authors face the issue of diagnosing acute renal rejection by imaging based diagnosis. The authors answered properly to the reviewers, but my main concern is the poor sensibility and specificity of imagings to make a correct diagnosis of acute rejection. a) Others clinical conditions not related to rejection may cause similar imaging, so imaging is not specific; b) Other techniques as biomarkers are useful to make diagnosis of rejection: such techniques should be described and compared with imaging c) It is of paramount importance to distinguish between cell mediated rejection and antibody- mediated rejection. The therapies differ. This point should be feced and should be documented that imaging is able to distinguish between the two different typer of rejection. d) In addition perfect imaging are compatible with severe acute rejection (low sensibility). Please refer to E. Bertoni, L. Di Maria, R. Piperno, M. Zanazzi, A. Rosati, L. Moscarelli, M. Salvadori Limits of Clinical Signs and non-Invasive Techniques in Detecting Severe Acute Rejection Journal of Nephrology 12: 100-103, 1999.