Literature review of the mechanisms of acute kidney injury secondary to acute liver injury.
Manuscript ID: 64938.

ROUND 1
Dear editor,

We thank the reviewer and editors for reviewing our manuscript. Although it has not been accepted for publication in World Journal of Hepatology, we thank the Editor-in-chief for his comments that it is of sufficient interest to be published in the World Journal of Nephrology.

We gladly accept this and are happy for the transfer to this journal for publication.

Please see our point by point response to reviewers.

Reviewer 1:

Thank you for inviting me to review this paper. However, reviews about acute kidney injury secondary to acute liver injury have been largely reported.

We thank the reviewer for their comment. Our review of the literature has not shown any review focusing on mechanisms of AKI secondary to hepatic Ischaemia Reperfusion injury.

There were no particular revisions requested by either the reviewer or editors and as such we have simply re-submitted the manuscript as it is.

Kind regards
Francis Robertson
ROUND 2

Below are detailed the specific responses to the individual comments made:

Responses to reviewer 0355433:
1. The title has been revised accordingly
2. This reference has been updated
3. Figure has been re-done using graphic software
4. Structure of review has been carefully addressed
5. It is not clear which section of the review you are referring to. If you are referring to the histological findings of renal injury following liver IR injury, no staging system has been agreed within the literature which is discussed within the text of the review. A diagram to provide an overview of renal injury following liver IR injury has been included.
6. A table of biomarkers has not been included as this is the subject of multiple reviews in its own right and is not the main focus of this review.
7. Limitations are included before conclusion
8. References have been rechecked and changed accordingly.

Responses to reviewer 05204757:
1. A section on Hypoxia-inducible factors has now been included
2. A table has been added in appendix 1 to include a summary of the major studies discussed throughout the review and an additional diagram to provide an overview of the renal injury in this context. Please convey my thanks to the reviewers for the time they have taken to look through this review and for the helpful comments and suggestions made. I hope that this review now meets the quality required for publication in your journal and look forward to hearing from you. Yours Sincerely,
Esther Platt