Name of journal: World Journal of Transplantation

Manuscript NO: 72632

Title: Innovative immunosuppression in kidney transplantation: A challenge for unmet needs

Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer’s code: 05040165

Position: Editorial Board

Academic degree: MD

Professional title: Associate Professor

Reviewer’s Country/Territory: Thailand

Author’s Country/Territory: Italy

Manuscript submission date: 2021-10-22

Reviewer chosen by: Qi-Guo Yao (Online Science Editor)

Reviewer accepted review: 2021-12-17 04:59

Reviewer performed review: 2021-12-26 15:52

Review time: 9 Days and 10 Hours

<table>
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<tr>
<th>Scientific quality</th>
<th>[ ] Grade A: Excellent</th>
<th>[ Y] Grade B: Very good</th>
<th>[ ] Grade C: Good</th>
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<td></td>
<td>[ ] Grade D: Fair</td>
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<td>Grade E: Do not publish</td>
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<th>Language quality</th>
<th>[ ] Grade A: Priority publishing</th>
<th>[ Y] Grade B: Minor language polishing</th>
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<td>[ ] Grade C: A great deal of language polishing</td>
<td>Grade D: Rejection</td>
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<th>Conclusion</th>
<th>[ ] Accept (High priority)</th>
<th>[ ] Accept (General priority)</th>
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<td></td>
<td>[ Y] Minor revision</td>
<td>Major revision</td>
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| Re-review          | [ Y] Yes | [ ] No |
SPECIFIC COMMENTS TO AUTHORS

“Innovative immunosuppression in kidney transplantation: a challenge for unmet needs”

This review aims to summarize available literature on new innovative drugs for kidney transplantation. The review was carefully done. This is a very interesting paper. You did a great job on provide evidence that principal unmet needs are treatment and prevention of delayed graft function, improve the long-term outcomes, desensitization and treatment of acute antibody-mediated rejection. However, there are some flaws, which should be resolved as following. 1. Systematic reviews and meta-analyses are considered to be the highest quality evidence on a research topic because their study design reduces bias and produces more reliable findings. Please add evidence from recent systematic review and meta-analysis. 2. Finally, since I am not a native English user, I did not check for grammatical errors thoroughly. This should be done by an appropriate language reviewer.
Name of journal: World Journal of Transplantation
Manuscript NO: 72632
Title: Innovative immunosuppression in kidney transplantation: A challenge for unmet needs

Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind
Reviewer’s code: 03291255
Position: Peer Reviewer
Academic degree: PhD
Professional title: Assistant Professor
Reviewer’s Country/Territory: United Kingdom
Author’s Country/Territory: Italy
Manuscript submission date: 2021-10-22
Reviewer chosen by: Qi-Gu Yao (Online Science Editor)
Reviewer accepted review: 2021-12-30 11:18
Reviewer performed review: 2022-01-09 11:00
Review time: 9 Days and 23 Hours

Scientific quality
[ ] Grade A: Excellent [ Y] Grade B: Very good [ ] Grade C: Good
[ ] Grade D: Fair [ ] Grade E: Do not publish

Language quality
[ ] Grade A: Priority publishing [ Y] Grade B: Minor language polishing
[ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection

Conclusion
[ ] Accept (High priority) [ Y] Accept (General priority)
[ ] Minor revision [ ] Major revision [ ] Rejection

Re-review
[ Y] Yes [ ] No
SPECIFIC COMMENTS TO AUTHORS
I read with great interest the review article titled, ‘Innovative immunosuppression in kidney transplantation: a challenge for unmet needs’ by M. Salvadori and A Tsalouchos. On the whole a well written informative article. A few suggestions: Abstract: ABO incompatible to be changed to antibody incompatible transplantation as only HLAi desensitization has been discussed with inclusion of some common treatment against ABMR resulting from ABOi transplant. Page 5 – Anti apoptopic strategies. To provide reason for why the RCT was terminated. is there any possibility of pursuing this option in the future? Pegylated carboxy haemoglobin – 2 line – ‘It also plays roles in protecting against protection against DGF’ – to correct repetition To add the summary of the findings so far Page 9: Paragraph 2 – Please add the correlation between EBV seronegatives and PTLD in the Belatacept group Page 14 Paragraph 1 – Please correct typo Cq1s Conclusion: 3rd Page 15 Paragraph 3 – Please change ABOi to AIT. Also, please remove ‘living donors’ as AIT includes both deceased and living donor transplants.