Reviewer’s report

Title: Effects of Low Versus Standard Pressure Pneumoperitoneum on Renal Syndecan-1 Shedding and VEGF Receptor-2 Expression in Living-donor Nephrectomy: A Randomized Controlled Study

Version: 1 Date: 25 Jan 2019

Reviewer: Ahmed Abdalla Mohamed

Reviewer's report:

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Please overwrite this text when adding your comments to the authors.BANE-D-18-00601_R1_ Reviewer's Comments

Thank you for the opportunity to review such an interesting manuscript but though the topic is interesting there are some major and some minor issues that should be addressed

Idea; Not New and expected

Title: The title doesn't conform to the hypothesis or the study design; it isn't related as well to the study primary outcome.

Abstract:

1. The aim of the study in the background section needs to be described in a better English language.

2. Background:

   1. English language needs improvement as there are lots of typos, grammar mistakes and unclear sentences that need to be addressed. The aim of the study should be better described.

Methods:

1. Again a lot of grammar and spelling mistakes needs to be addressed.

2. Port placement at 8mmHg pressure was difficult;
3. How was the investigator blinded to the technique and at the same time present in the block area?

4. How many patients participated in the preliminary test done before sample size calculation?

5. What's the role of cardiology in the study; is there was a difference in SV and cop between low pressure and high pressure group.

6. There was no sufficient information about quadrates lamborum block; which at which level it was performed, was there a difference in pain score between both groups?

7. It would be helpful for the reader to attach a video as a supplementary file to show the feasibility of technique visualization of the surgical procedure under low pressure.

8. It would be very help if the author adds the long term follow up for each group.

Discussion: Previous Study show Some differences in favor of the low-pressure group were observed for arterial to end-tidal CO2 gradient, serum bilirubin and serum alanine transferase; however, no significant differences were observed in cardiopulmonary parameters or liver function tests.

Three parameters related to operative comfort, i.e. vision, space for dissection, and vision while using suction make surgery become difficult and may cause tissue injury and lengthy operation that not in line with the results of present article

Only a few studies have dealt with comparison of cardiopulmonary parameters at different pressures of PP [Dexter SP, Vucevic M, Gibson J, McMahon MJ. Hemodynamic consequences of high- and low-pressure capnoperitoneum during laparoscopic cholecystectomy. Surg Endosc. 1999;13(4):376-381.

Wallace DH, Serpell MG, Baxter JN, O'Dwyer PJ. Randomized trial of different insufflation pressures for laparoscopic cholecystectomy. Br J Surg. 1997;84(4):455-458. 7, 8, 12, 20, 21]. Wallace et al in a prospective, randomized double-blind study of 40 patients showed that there were no significant differences in intraoperative heart rate or cardiac index, although the latter fell significantly soon after insufflation in both groups. The fall in cardiac index lasted longer (7 vs 2 minutes) and coincided with a slower rise in mean arterial pressure in the group with higher insufflation pressure.


The discussion section in general needs to be summarized with much improvement of the English language, there are many grammar and spelling mistakes.

Yours Sincerely

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Are the methods appropriate and well described?
If not, please specify what is required in your comments to the authors.

No

Does the work include the necessary controls?
If not, please specify which controls are required in your comments to the authors.

No

Are the conclusions drawn adequately supported by the data shown?
If not, please explain in your comments to the authors.

No

Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?
If an additional statistical review is recommended, please specify what aspects require further assessment in your comments to the editors.

I recommend additional statistical review

Quality of written English
Please indicate the quality of language in the manuscript:

Not suitable for publication unless extensively edited

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