Reviewer’s report

Title: Effect of ulinastatin on post-operative blood loss and allogeneic transfusion in patients receiving cardiac surgery with cardiopulmonary bypass: a prospective randomized controlled study with 10-year follow-up

Version: 0 Date: 25 Mar 2020

Reviewer: Sanjay Agrawal

Reviewer's report:

Congratulations to presenting this article for managing post-operative bleeding. The language is quite lucid and the statistics is well chartered. Going through all the details, I had few queries relating to this matter.

1. Tranexamic Acid is well established drug for managing post-operative bleeding, and as such there is not statistical difference in outcome between use of Ulinastatin and Tranexamic Acid, so how does Ulinastatin offer any advantage for its use?

2. Are there any documented adverse reaction for Ulinastatin, this paper doesn't mention about it?

3. Chest drainage beyond 12 hours is not always significant, as most of it is reactionary fluid and not bleeding.

4. There is statistical significant difference in RBS transfusion rate between Tranexamic Acid and Placebo, and not difference between Ulinastatin and Placebo.

5. You mentioned that Tranexamic Acid has shown increased thrombotic rates, but it's not reflected in your study.

6. What was the way of randomisation as the numbers look quite similar for type of cardiac surgery in different groups? Where the numbers kept similar intentionally for different groups or it was incidental?

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