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PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 34992

Title: Chronic Liver disease is universal in children with biliary atresia living with native liver

Reviewer's code: 02510721

Reviewer's country: Italy

Science editor: Ya-Juan Ma

Date sent for review: 2017-06-10

Date reviewed: 2017-06-20

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

To author The study shows in the details the important experience. The educational outcomes of the reading of the manuscript is considerable

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 34992

Title: Chronic Liver disease is universal in children with biliary atresia living with native liver

Reviewer's code: 00054186

Reviewer's country: Japan

Science editor: Ya-Juan Ma

Date sent for review: 2017-06-10

Date reviewed: 2017-06-21

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

This manuscript describes current situation of treatment of biliary atresia (BA) in Malaysia. In Malaysia, liver transplantation (LT) is not common. Therefore, most patients with BA must live with their native livers after Kasai's hepatic portoenterostomy (HPE). This manuscript reemphasized devastating nature of BA and essentialness of LT for patients with BA. My concerns are as follows. Kaplan-Meier survival curve showing overall and chronic liver disease-free survival should be shown. Furthermore, the authors emphasized that early referral of BA patients to tertiary pediatric medical center is important for gaining better outcomes, rationale for importance of early referral was not provided in this manuscript. I understand they cannot draw any definitive or reliable results/findings for the rationale from the present study due to small sample size. In that case, detailed case-by-case analyses and/or presentation of anecdotal successful cases/episodes can be shown and seems important

just because sample size is very small. It is a globally known fact that most patients with BA cannot survive without LT. The authors should show medical signs, symptoms, and/or prodrome, as well as countermeasures for those, that must not be overlooked in countries like Malaysia where LT is not common but may be overlooked in countries where LT is readily available.