

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Clinical Cases

**Manuscript NO:** 39251

**Title:** Comparison of simplified and traditional pericardial devascularisation combined with splenectomy for the treatment of portal hypertension

**Reviewer's code:** 02650654

**Reviewer's country:** Italy

**Science editor:** Li-Jun Cui

**Date sent for review:** 2018-04-08

**Date reviewed:** 2018-04-09

**Review time:** 17 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input checked="" type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input type="checkbox"/> No

### SPECIFIC COMMENTS TO AUTHORS

Please, correct the spelling of anatomical structure. Discuss the value of surgery in Portal Hypertension, and relation between thrombocytopenia and risk of thrombosis. Compare the proposed technique of pericardial devascularization with the Sugiura



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procedure. An anatomical schema of your technique would better explain its originality.

#### **INITIAL REVIEW OF THE MANUSCRIPT**

##### ***Google Search:***

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

##### ***BPG Search:***

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- ☐ No

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Clinical Cases

**Manuscript NO:** 39251

**Title:** Comparison of simplified and traditional pericardial devascularisation combined with splenectomy for the treatment of portal hypertension

**Reviewer's code:** 03024263

**Reviewer's country:** Russia

**Science editor:** Li-Jun Cui

**Date sent for review:** 2018-04-08

**Date reviewed:** 2018-04-09

**Review time:** 1 Day

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input checked="" type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input type="checkbox"/> No

### SPECIFIC COMMENTS TO AUTHORS

Since M.A. Hassab proposed his operation in 1964, a number of its modifications have been developed. In addition, the addition of the Hassab's operation with endoscopic methods significantly increased its effectiveness. Indeed, unlike the Sugiura-Futagawa



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procedure, Hassab's operation devascularizes only the extramural vessels; intramural vessels are not treated. Thus, endoscopic injection sclerotherapy or endoscopic variceal band ligation is needed for embolization of the intramural vessels and venous network. The modification of the Hassab's operation proposed by the authors is known to me. Now and when I read about her before I was surprised by the unique results obtained. In this connection, I am interested in how to explain the greater effectiveness of the proposed modification than the original Hassab's operation in the incidence rates of esophagogastric variceal rebleeding and portal vein thrombosis. The present study has some limitations, which are pointed out by the authors. I would also like to see a schematic representation of the proposed Hassab's operation modification.

#### **INITIAL REVIEW OF THE MANUSCRIPT**

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## PEER-REVIEW REPORT

**Name of journal:** World Journal of Clinical Cases

**Manuscript NO:** 39251

**Title:** Comparison of simplified and traditional pericardial devascularisation combined with splenectomy for the treatment of portal hypertension

**Reviewer's code:** 00182114

**Reviewer's country:** Japan

**Science editor:** Li-Jun Cui

**Date sent for review:** 2018-04-08

**Date reviewed:** 2018-04-10

**Review time:** 1 Day

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input checked="" type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input checked="" type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input type="checkbox"/> No

## SPECIFIC COMMENTS TO AUTHORS

This is very interesting paper . Author concluded that compared to STPD, SSPD is a simple and easy procedure resulting in less tissue damage. I ask some questions to author. 1.Please state the reason and difference why the frequency of rebleeding in table



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3 is 5.88% for S group and 12.94% for T group. Moreover, please tell me the rebleeding site in S group and T group. 2. Author perform surgical operation for esophageal varix, child A, B and C. Please tell me the surgical indication for esophageal varix in your hospital. 3. The major problem after devascularization for esophageal varix is gastric congestion. How about gastric congestion after S group and T group. 4. From the point of PHG in admission, S group is 33.05%, T group is 25%. Please comment about the postoperative PHG in S group and T group.

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## PEER-REVIEW REPORT

**Name of journal:** World Journal of Clinical Cases

**Manuscript NO:** 39251

**Title:** Comparison of simplified and traditional pericardial devascularisation combined with splenectomy for the treatment of portal hypertension

**Reviewer's code:** 01557045

**Reviewer's country:** Mexico

**Science editor:** Li-Jun Cui

**Date sent for review:** 2018-04-08

**Date reviewed:** 2018-04-19

**Review time:** 11 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input checked="" type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input checked="" type="checkbox"/> Onymous
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			Conflicts-of-Interest:
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			<input checked="" type="checkbox"/> No

### SPECIFIC COMMENTS TO AUTHORS

Devascularization procedures (porto azygos disconnection) have been studied for decades for the treatment of portal hypertension with history of bleeding. In western countries was used as alternative therapeutic choice for patients in which a shunt is not



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feasible. They have a high rebleeding rate. Explanation of the technique of STPD surgery, is needed. In western countries, treatment of portal hypertension is endoscopic band ligation as first line, with TIPS as a rescue therapy and as a bridge to live transplantation. So, the results of the study are only of value for Asiatic patients. It is important to record and report the rebleeding rate and what are the strategies to treat rebleeding. Also, 30 days mortality for each child group is important to record and report (in all series Child C patients do none than Child A patients.

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