

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 46128

**Title:** Safety and efficacy of transjugular intrahepatic portosystemic shunt combined with palliative treatment in patients with hepatocellular carcinoma

**Reviewer's code:** 03024263

**Reviewer's country:** Russia

**Science editor:** Jia-Ping Yan

**Date sent for review:** 2019-02-18

**Date reviewed:** 2019-02-20

**Review time:** 18 Hours, 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 checked="" type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

### SPECIFIC COMMENTS TO AUTHORS

I got acquainted with great interest with a retrospective study of Dr. S.H. Luo et al., showing the safety and efficacy of TIPS in combination with palliative treatment for portal hypertension (PH) in patients with hepatocellular carcinoma (HCC). Indeed,



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recent studies have shown that the lower risk of death associated with TIPS was similar among cirrhotic patients with or without HCC. However, currently due to the danger of severe complications, the use of TIPS is discussed for small subpopulations of patients with HCC who have bled from varices while on non-selective beta blockers (NSBB) prophylaxis. In this regard, I would like to clarify whether patients received NSBB therapy (+ endoscopic variceal ligation)? Please explain the lack of information about this in the text of the manuscript. I also suggest to explain why the patients were not on the waiting list for liver transplant. Indeed, currently HCC is the fastest growing indication for liver transplant worldwide. The present study is limited by its retrospective design, small number of patients, and inclusion of patients from a single institution. Larger series and multicenter trials with a prospective design are required to validate the results obtained assumptions.

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

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

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

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

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

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 46128

**Title:** Safety and efficacy of transjugular intrahepatic portosystemic shunt combined with palliative treatment in patients with hepatocellular carcinoma

**Reviewer's code:** 03646639

**Reviewer's country:** Japan

**Science editor:** Jia-Ping Yan

**Date sent for review:** 2019-03-03

**Date reviewed:** 2019-03-05

**Review time:** 16 Hours, 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 type="checkbox"/> Grade B: Minor language	(High priority)	<input 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 checked="" type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
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publish	<input type="checkbox"/> Grade D: Rejection	<input checked="" type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input checked="" type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

### SPECIFIC COMMENTS TO AUTHORS

The authors demonstrated that safety and efficacy of transjugular intrahepatic portosystemic shunt combined with palliative treatment in patients with HCC. They divided the patients into two group: Group A, the patients with portal hypertension and



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HCC who were treated with TIPS plus palliative treatment and RFA and Group B, those without TIPS placement, and received palliative treatment and RFA. They showed that the mortality rate from VB in Group A was higher than in Group B. However, they conclude that TIPS combined with palliative treatment is safe and effective for portal hypertension in patients with HCC. 1) The author should show the reason why TIPS is contraindicated in patients with liver cancer. 2) The author should clearly show the indication of the TIPS. 3) I think that there is alternative therapy instead of TIPS to reduce portal hyper tension in patients with HCC. The authors should discuss it.

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

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

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- ☐ Plagiarism
- ☐ No