

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 48373

Title: Current approaches to the management of patients with cirrhotic ascites

Reviewer's code: 03656580

Reviewer's country: China

Science editor: Ruo-Yu Ma

Reviewer accepted review: 2019-04-16 06:23

Reviewer performed review: 2019-04-17 00:06

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 checked="" 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 checked="" 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 type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

Authors reviewed the current approaches to the management of patients with cirrhotic ascites in relation to the severity of its clinical manifestations. The key to successful management of patients with ascites may be the stratification of the risk of an adverse outcome and personalized therapy. Pathogenetically based approach to the choice of



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pharmacotherapy and optimization of minimally invasive methods of treatment may improve the quality of life and increase the survival rate of this category of patients.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

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

BPG Search:

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

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 48373

Title: Current approaches to the management of patients with cirrhotic ascites

Reviewer's code: 02943023

Reviewer's country: South Korea

Science editor: Ruo-Yu Ma

Reviewer accepted review: 2019-04-16 08:13

Reviewer performed review: 2019-04-19 06:29

Review time: 2 Days and 22 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 checked="" 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 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

Thank you so much for very interesting and informative review for current approaches to the management of patients with cirrhotic ascites in relation to the severity of its clinical manifestations. I would like to make a couple of comments. 1, In figure 2, it is needed to define 'ascites caused by portal hypertension' using serum-ascites albumin



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gradients (SAAG). 2. Authors described about medical treatments for refractory ascites, such as clonidine, midodrine, and terlipressin. However, the addition of clonidine or midodrine to diuretic treatment is not recommended in current guidelines because the clinical data is not sufficient. Therefore, it would be better to comment about the level of evidence for medical treatments other than diuretics. 3. In this review, authors did not describe about the controversial issue on the use of non-selective beta-blockers in patients with refractory ascites. Please add the brief comments about it.

INITIAL REVIEW OF THE MANUSCRIPT

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- ☐ No

BPG Search:

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- ☐ Plagiarism
- ☐ No

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 48373

Title: Current approaches to the management of patients with cirrhotic ascites

Reviewer's code: 02520900

Reviewer's country: Germany

Science editor: Ruo-Yu Ma

Reviewer accepted review: 2019-04-17 05:24

Reviewer performed review: 2019-04-19 07:22

Review time: 2 Days and 1 Hour

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input checked="" type="checkbox"/> Grade B: Very good	<input 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 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 checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

Name of Journal: World Journal of Gastroenterology Manuscript ID: 03024263

Manuscript Type: MINIREVIEWS Current Approaches to the Management of Patients with Cirrhotic Ascites This review describes current approaches to the management of patients with hydropic decompensation. The review is well written, the most

important studies in the recent 30 years are recognized and implemented in the review. It provides a well overview about current diagnostic and current treatment approach about ascites and associated complication. Particular for younger residents and non-hematologist physician it would be very helpful. Minor comment: Paragraph: Treatment of Ascites with Cirrhosis page 4; 2 pages before Treatment of Refractory Ascites. The authors state: "The frequency of severe intra-abdominal bleedings during LVP does not exceed 1%[60]. Therefore, the use of fresh frozen plasma or platelet concentrate can be recommended only in certain clinical cases and not as standard therapy[61]. For example, they could be used in the case of severely impaired liver function assessed using the CTP and MELD scores" I totally disagree with the statement. The reason for bleeding in cirrhosis is not related to coagulopathy, but portal hypertension (see Saner et al. (Minerva Anesthesiologica). Standard lab does not predict bleeding, although pretending hemostasis disorder (Haas, British J Anaesth 2015, Ewe et al, Dig Dis Sci. 1981, Tripodi, Hepatology 2005). The use of FFPs do not improve coagulation disorder (Stanworth et al., Br J Haematology 2004, Transfusion 2011, Crit Care 2011, Desborough, Cochrane Database Syst Rev 2015....) The use of FFP only increase portal hypertension with an increased risk of bleeding (Gianinni. Hepatology:, 2014). Risk assesment for bleeding should onl y be done with visco-elastic tests like TEG or Rotem (Kirchner et al. Transfusion 2014, Dotsch et al. Br J Anaesthesia 2017, Bezinover, Transplantation 2018). Although we have lower limits for bleeding after or during invasive procedure for these procedures (Dotsch, Br J Anaesth 2017) and one RCT (De Pietri; Hepatology 2016), data about proprocedural safe lower margin are still lacking.

INITIAL REVIEW OF THE MANUSCRIPT

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☐ Duplicate publication

☐ Plagiarism

☐ Y] No

BPG Search:

☐ The same title

☐ Duplicate publication

☐ Plagiarism

☐ Y] No

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 48373

Title: Current approaches to the management of patients with cirrhotic ascites

Reviewer's code: 02822816

Reviewer's country: Romania

Science editor: Ruo-Yu Ma

Reviewer accepted review: 2019-04-16 08:24

Reviewer performed review: 2019-04-21 16:04

Review time: 5 Days and 7 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	<input checked="" type="checkbox"/> Accept	Peer-Review:
<input checked="" type="checkbox"/> Grade B: Very good	<input 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 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 type="checkbox"/> Major revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

To the authors, Good piece of work. Congratulations.

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BPG Search:

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- ☐ Plagiarism
- ☐ No

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 48373

Title: Current approaches to the management of patients with cirrhotic ascites

Reviewer's code: 02904354

Reviewer's country: China

Science editor: Ruo-Yu Ma

Reviewer accepted review: 2019-04-16 06:25

Reviewer performed review: 2019-04-22 14:07

Review time: 6 Days and 7 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
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		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
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			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

The authors worked hard on the review paper. I recommend a minor revision. Because this is a review paper in contemporary era, the authors should more comprehensively and accurately review the published papers, especially recent publications. 1. Lots of previous publications suggested the harmful effect of somatostatin or octreotide on renal



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function. Please improve your descriptions. 2. A recent literature review is useful for discussing the role of terlipressin on HRS (PMID: 30474439).

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