

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Hepatology

**Manuscript NO:** 58594

**Title:** Successful hepatic resection for recurrent hepatocellular carcinoma after lenvatinib treatment: case report

**Reviewer's code:** 03443948

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Professor

**Reviewer's Country/Territory:** China

**Author's Country/Territory:** Japan

**Manuscript submission date:** 2020-07-28

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2020-07-31 06:30

**Reviewer performed review:** 2020-08-07 04:24

**Review time:** 6 Days and 21 Hours

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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#### **SPECIFIC COMMENTS TO AUTHORS**

1.lenvatinib has emerged in the first-line setting after a positive phase 3 study, Although conversion therapy for HCC has not yet been established, lenvatinib is expected to be a possible candidate agent. In this case, lenvatinib induced a partial response (PR) for rapid growth of recurrent HCC with bone metastases, and conversion to surgery was successfully achieved for the purpose of controlling the intrahepatic lesion for the first time. Provides a new treatment perspective for recurrent HCC. 2.Sorafenib has been the first-line treatment in this setting for almost a decade. Why not choose Sorafenib for treatment? Have you tried before?

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Hepatology

**Manuscript NO:** 58594

**Title:** Successful hepatic resection for recurrent hepatocellular carcinoma after lenvatinib treatment: case report

**Reviewer's code:** 03714434

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

**Reviewer's Country/Territory:** Japan

**Author's Country/Territory:** Japan

**Manuscript submission date:** 2020-07-28

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2020-07-29 08:12

**Reviewer performed review:** 2020-08-07 10:49

**Review time:** 9 Days and 2 Hours

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

## **SPECIFIC COMMENTS TO AUTHORS**

Major concerns: 1) In “Multidisciplinary Expert Consultation” section, the authors decided to administer lenvatinib to suppress the rapidly increasing intrahepatic lesion and before surgery. It is desirable to present a full discussion of the reasons for not choosing surgical resection without prior lenvatinib. 2) In order to achieve shrinkage of the intrahepatic main tumor, transcatheter therapy, such as B-TACE instead of Lenvatinib, is an option. The reasons for choosing prior treatment with lenvatinib should be fully described. 3) In “Final Diagnosis” section, the authors evaluate therapeutic response to lenvatinib by CT imaging after 1 month of lenvatinib administration. If lenvatinib had been so effective, there would have been an option to continue further treatment. It is advisable to fully describe the reasons for the decision to perform surgery at this time. 4) Has there been a recurrence of HCC in the postoperative period to date, and how long has lenvatinib been administered postoperatively? Minor concerns: 1) In “Introduction” section, “Hepatic artery embolization and chemotherapy” should be changed to “Transarterial chemoembolization (TACE)”. 2) In “Laboratory examinations” section, it would be better to describe Child-Pugh score/classification and ALBI score/mALBI grade. Was mALBI grade 2a or 2b? 3) In “Imaging examinations” section, the authors described that the mass rapidly increased in 5 months. Please show the CT image 5 months before. 4) In “Imaging examinations” section, the authors described that elevated FDG uptake was shown in the sternum. Was the main tumor also showed elevated uptake of FDG? Please show the PET image. 5) In “Multidisciplinary Expert Consultation” section, the authors described lenvatinib was administered at a dose of 8 mg, not 12 mg. Was the patient weigh less than 60 kg?

## RE-REVIEW REPORT OF REVISED MANUSCRIPT

**Name of journal:** World Journal of Hepatology

**Manuscript NO:** 58594

**Title:** Successful hepatic resection for recurrent hepatocellular carcinoma after lenvatinib treatment: case report

**Reviewer's code:** 03714434

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

**Reviewer's Country/Territory:** Japan

**Author's Country/Territory:** Japan

**Manuscript submission date:** 2020-07-28

**Reviewer chosen by:** Chen-Chen Gao

**Reviewer accepted review:** 2020-09-30 08:44

**Reviewer performed review:** 2020-09-30 08:55

**Review time:** 1 Hour

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

## SPECIFIC COMMENTS TO AUTHORS

The manuscript has been much improved and is in a nice condition now. I think this manuscript is acceptable for publication.