

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 63629

Title: Radiofrequency ablation vs surgical resection in elderly patients with hepatocellular carcinoma in Milan criteria

Reviewer's code: 05238705

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Postdoc, Professor, Surgeon, Surgical Oncologist, Teacher, Technical Editor

Reviewer's Country/Territory: China

Author's Country/Territory: Italy

Manuscript submission date: 2021-02-01

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-02-02 06:53

Reviewer performed review: 2021-02-02 07:42

Review time: 1 Hour

Scientific quality	<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 Grade E: Do not publish
Language quality	<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
Conclusion	<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
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous

statements

Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Comments: Dear Authors: In general, this is a meaningful work to a certain degree. Here is my assessment from three angles, including language, content, and originality.

Language The language of this article is very well, but there are still several sentences that can be adjusted. 1. in abstract part, "Statystical analysis was performed using the Kaplan-Meier method before and after propensity score matching(PSM)" should change into "Statistical analysis was performed using the Kaplan-Meier method before and after propensity score matching (PSM)". 2. "Evaluation of short and long term outcome in elderly patients(>70 years)" there should be a space between "patients" and "(>70 years)". Please check the whole manuscript for there are some other similar omissions.

Content 1. Question: In "MATERIALS AND METHODS", the author should give more detail of Inclusion and exclusion criteria. And as they mentioned "non-invasive findings", they should also describe it. 2. Question: In this study, the author applied a PSM method to reduce bias of two groups. Although the intention of propensity score matching of baseline variables was to reduce differences between groups, a decreased sample size will appear when increasing matched variables. So the author should explain why choose "co-morbidities, ASA score, Child and MELD scores, number of lesions, and tumor size" as matching variables. 3. Suggestion: The author only did a univariate and multivariate analysis once in the study. I thought that they could conduct a univariate and multivariate analysis both before matching and after matching to obtain a more scientific result.

Originality This work emerges a high degree of innovation, especially in the field of interdisciplinary clinical diagnosis and treatment of early stage HCC.

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 63629

Title: Radiofrequency ablation vs surgical resection in elderly patients with hepatocellular carcinoma in Milan criteria

Reviewer's code: 03737064

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: Italy

Manuscript submission date: 2021-02-01

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-02-03 07:05

Reviewer performed review: 2021-02-04 06:41

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Scientific quality	<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
Language quality	<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
Conclusion	<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
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	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 study evaluated the safety and efficacy of surgical resection and radiofrequency ablation on elderly HCC patients in Milan criteria managed in 10 European centers. The results has a certain clinical value for the clinical treatment of HCC. 1. There were similar reports about surgical resection and radiofrequency ablation on HCC patients in Milan criteria in the PubMed, what is the novel idea in the paper? 2. Fig1a-Fig1d in the result description corresponds to the Fig1-Fig4 actually, please revise that. 3. The incidence of AEs in surgical resection group is high, How to treat for AEs? 4. The surgical resection group were included patients who underwent laparoscopic and open liver resection, How to handle with the issue? 5. The age of patients included in this study was ≥ 70 years, but in Table 1, 69.5 years and 69.8 years were found in the age(yr) column in the surgery group. 6. The previous treatment before surgical resection or radiofrequency ablation has a great impact on the prognosis of patients, it is recommended to supply the specific treatment in Table 1.

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 63629

Title: Radiofrequency ablation vs surgical resection in elderly patients with hepatocellular carcinoma in Milan criteria

Reviewer's code: 03741923

Position: Editorial Board

Academic degree: MD

Professional title: Associate Professor

Reviewer's Country/Territory: China

Author's Country/Territory: Italy

Manuscript submission date: 2021-02-01

Reviewer chosen by: Ya-Juan Ma

Reviewer accepted review: 2021-02-06 09:41

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Scientific quality	<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
Language quality	<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
Conclusion	<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
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	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

In this study, the authors compared the short and long term outcome between radiofrequency ablation (RFA) versus surgical resection in elderly patients (>70 years) with hepatocellular carcinoma (HCC) in Milan criteria. This is an interesting multicenter retrospective study, some critical issues remain to be clarified in this manuscript. 1. As we know, the recurrence of HCC after RFA is associated closely with incomplete ablation. Therefore, the authors should describe how to tell whether the nodules were ablated completely or not. If incompletely, how to re-treat the nodules? 2. In this study, the RFA postoperative course was burdened by a lower rate of serious complications (Clavien Dindo III-IV) than the LR group ($p=0.001$). Previous reports demonstrated that laparoscopic liver resection had a fewer complications than open liver resection. Therefore, is it possible to compare laparoscopic or open RFA with laparoscopic or open liver resection (laparoscopic RFA vs laparoscopic liver resection, open RFA vs open liver resection), respectively? Or, compare RFA with laparoscopic or open surgery, respectively. 3. If postoperative histopathology found microscopic vascular invasion (MVI), did the authors have other postoperative treatments? Because MVI is associated closely with recurrence after surgery. 4. Because we can't tell whether the HCC patients receiving RFA had MVI which is an important recurrence risk factor, in the discussion section, the authors should discuss it. 5. The range of age of the elderly patients should be provided.

RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 63629

Title: Radiofrequency ablation vs surgical resection in elderly patients with hepatocellular carcinoma in Milan criteria

Reviewer's code: 03741923

Position: Editorial Board

Academic degree: MD

Professional title: Associate Professor

Reviewer's Country/Territory: China

Author's Country/Territory: Italy

Manuscript submission date: 2021-02-01

Reviewer chosen by: Chen-Chen Gao

Reviewer accepted review: 2021-03-15 05:39

Reviewer performed review: 2021-03-17 05:19

Review time: 1 Day and 23 Hours

Scientific quality	<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
Language quality	<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
Conclusion	<input checked="" type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Peer-reviewer statements	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



**Baishideng
Publishing
Group**

7041 Koll Center Parkway, Suite
160, Pleasanton, CA 94566, USA
Telephone: +1-925-399-1568
E-mail: bpgoffice@wjgnet.com
https://www.wjgnet.com

no other comments