

## PEER-REVIEW REPORT

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

**Manuscript NO:** 67219

**Title:** Can the computed tomography texture analysis of colorectal liver metastases predict the response to first-line cytotoxic chemotherapy?

**Provenance and peer review:** Invited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 05625827

**Position:** Peer Reviewer

**Academic degree:** FASCRS, MD, PhD

**Professional title:** Lecturer

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

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

**Manuscript submission date:** 2021-04-25

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-05-16 04:44

**Reviewer performed review:** 2021-05-17 09:02

**Review time:** 1 Day and 4 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" 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 Grade E: Do not publish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 type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No



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<b>Peer-reviewer statements</b>	Peer-Review: [ <input type="checkbox"/> ] Anonymous [ <input checked="" type="checkbox"/> ] Onymous Conflicts-of-Interest: [ <input type="checkbox"/> ] Yes [ <input checked="" type="checkbox"/> ] No
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## **SPECIFIC COMMENTS TO AUTHORS**

This manuscript presents the predictive CT texture of responding CRLMs. This study is important for understanding imaging biomarker with CT texture analysis. However, the impact is lost by exclusion of patients treated with chemotherapy combined with targeted therapy. Major points: 1. As stated in the introduction, there has been an increase in the PFS and OS rates since the introduction of targeted therapies. Standard first-line regimen for patients with metastatic colorectal cancer is doublet or triplet chemotherapy combined with a molecular targeted drug. You should mention why the authors focused on the chemotherapy without targeted therapies. 2. Several studies about CT texture analysis for predicting the response to chemotherapy for CRLMs has been done. I think you need to clearly articulate why this study has to identify other new imaging biomarkers. The authors would say what is the lack in the previous studies in the introduction section in detail. 3. The discussion section seems rather abrupt and muddled. The arguments should be laid out clearly based on your results.

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**Reviewer's code:** 05469117

**Position:** Editorial Board

**Academic degree:** PhD

**Professional title:** Adjunct Professor, Chief Physician, Deputy Director

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

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

**Manuscript submission date:** 2021-04-25

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-05-16 13:48

**Reviewer performed review:** 2021-05-21 16:53

**Review time:** 5 Days and 3 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No



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## **SPECIFIC COMMENTS TO AUTHORS**

1.As we all know, the PFS of first-line chemotherapy is 5-6 months. more than 7 months delay since onset of first line chemotherapy and follow-up CT scans may affect the response evaluation.So,is it appropriate to include the patients that the interval of CT scan was less than or equal to 7 months since onset of first line chemotherapy in “METHODS”? 2.Considering the heterogeneity of tumor, according to RECIST 1.1 standard, only two liver metastases can be selected as target lesions, and other lesions can only be regarded as non target lesions. And the evaluation criteria for these two types of lesions are different.But the study did not indicate whether both types of lesions were included in the analysis. 3.There is an error in “Table 3 RECIST RESPONSE”, PD is wrongly expressed as PR.

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**Reviewer's code:** 05775440

**Position:** Peer Reviewer

**Academic degree:** PhD

**Professional title:** Associate Research Scientist

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

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

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**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-05-13 05:41

**Reviewer performed review:** 2021-05-23 02:52

**Review time:** 9 Days and 21 Hours

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

Although the results need to be validated with larger patient cohorts, this study found a few texture features and a promising radiomics signature associated with the response of CRLMs to first-line cytotoxic chemotherapy. The heterogeneous conclusion in the field about the texture analysis results associated with responding CRLMs indicate that more study need to improve the prediction of disease. I think this study is contributing to this research field.

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**Peer-review model:** Single blind

**Reviewer's code:** 05908713

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Research Fellow, Surgeon

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

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

**Manuscript submission date:** 2021-04-25

**Reviewer chosen by:** AI Technique

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**Reviewer performed review:** 2021-05-27 20:21

**Review time:** 10 Days and 23 Hours

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" 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
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## **SPECIFIC COMMENTS TO AUTHORS**

The subject of the study is really extremely interesting, current. The effort of the authors in building the work is to be appreciated. At the same time, methodologically, I believe it is impossible to evaluate the correlation of textures with the chemotherapy response considering such different chemotherapy regimens, of such different durations (tissue damage induced by CT is mainly dependent on the type and duration of the CT together with the genetics of the tumor). and other different characteristics, with a sample of only 29 patients. Furthermore, the multivariate analysis should have included all 8 features, but it would have been impossible based on the sample. The sample size is not correct and invalidates the results. Concluding that some features are "significantly" correlated with such a methodology is incorrect.