



## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Gastrointestinal Oncology*

**Manuscript NO:** 74238

**Title:** Advances in Postoperative Adjuvant Therapy for Primary Liver Cancer

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

**Peer-review model:** Single blind

**Reviewer's code:** 03552327

**Position:** Peer Reviewer

**Academic degree:** BSc, DPhil

**Professional title:** Associate Professor

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

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

**Manuscript submission date:** 2021-12-29

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-01-06 21:25

**Reviewer performed review:** 2022-01-10 09:39

**Review time:** 3 Days and 12 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 Grade E: Do not publish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
<b>Peer-reviewer</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous



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

### **SPECIFIC COMMENTS TO AUTHORS**

The authors have comprehensively reviewed the literature on the advances in postoperative adjuvant therapy for hepatocellular carcinoma (HCC). In general, the manuscript was well written and well organised. This review provides a timely update on the recent advances in the treatment of postoperative metastasis and recurrence of HCC. However, I would like to highlight a few points to add on, as below: 1. GLOBOCAN data should be updated to reveal the most recent statistics in 2021. 2. Nearly 25% of all HCCs harbour mutations including TERT, TP53 and CTNNB1, with the translational potential for clinical impact. Although they have remained undruggable for a long time, I believe these should be discussed, if not mentioned in the review. 3. RCTs and meta-analyses based on RCTs exploring the efficacy of adjuvant interferon therapy for HCC should also be included. 4. Include studies (updates) on Vitamin K2 analog and retinoids, as well as heparanase inhibitor PI-88 in postoperative HCC.



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**Reviewer’s code:** 03538158

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Associate Professor

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

**Author’s Country/Territory:** China

**Manuscript submission date:** 2021-12-29

**Reviewer chosen by:** Qi-Gu Yao

**Reviewer accepted review:** 2022-02-24 16:07

**Reviewer performed review:** 2022-03-06 04:10

**Review time:** 9 Days and 12 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
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Zeng et al. reviewed “Advances in postoperative adjuvant therapy for primary liver cancer”. 1. In abstract section, How was immune checkpoint inhibitors (ICI)? 2. In Introduction section, “HCC often occurs in the setting of chronic liver disease with or without cirrhosis, and the most common etiologies are chronic hepatitis B virus (HBV) and hepatitis C virus (HCV) infection, alcohol intake, and aflatoxin exposure.” How was NASH?