Dear Dr. Yang,

We are pleased to inform you that, after preview by the Editorial Office and peer review as well as CrossCheck and Google plagiarism detection, we believe that the academic quality, language quality, and ethics of your manuscript (Manuscript NO.: 74629, Minireviews) basically meet the publishing requirements of the World Journal of Gastroenterology. As such, w-e have made the preliminary decision that it is acceptable for publication after your appropriate revision.

Upon our receipt of your revised manuscript, we will send it for re-review. We will then make a final decision on whether to accept the manuscript or not, based upon the reviewers' comments, the quality of the revised manuscript, and the relevant documents.

Please follow the steps outlined below to revise your manuscript to meet the requirements for final acceptance and publication.

Re: Dear Editors and Reviewers, thank you all for handling the review of our manuscript and decision. We are grateful for the opportunity to revise this manuscript. Based on your highly constructive comments and suggestions, we have addressed all of your comments and suggestions. We have revised the paper, and make a point-to-point response to the issues raised in the peer review report.

1 MANUSCRIPT REVISION DEADLINE

We request that you submit your revision in no more than **14 days. Please note that you have only two chances for revising the manuscript**.

2 PLEASE SELECT TO REVISE THIS MANUSCRIPT OR NOT

Please login to the F6Publishing system at https://www.f6publishing.com by entering your registered E-mail and password. After clicking on the "Author Login" button, please click on "Manuscripts Needing Revision" under the "Revisions" heading to find your manuscript that needs revision. Clicking on the "Handle" button allows you to choose to revise this manuscript or not. If you choose not to revise your manuscript, please click on the "Decline" button, and the manuscript will be WITHDRAWN.

3 SCIENTIFIC QUALITY

Please resolve all issues in the manuscript based on the peer review report and make a point-by-point response to each of the issues raised in the peer review report. Note, authors must resolve all issues in the manuscript that are raised in the peer-review report(s) and provide point-by-point responses to each of the issues raised in the peer-review report(s); these are listed below for your convenience:

Reviewer #1:

Scientific Quality: Grade C (Good)

Language Quality: Grade A (Priority publishing)

Conclusion: Minor revision

Specific Comments to Authors: Review comments   WJG-74629_reviewer It is my great honour and pleasure to review such an interesting manuscript. The authors review the principle of intravoxel incoherent motion diffusion-weighted imaging (IVIM-DWI) and its progress in hepatocellular carcinoma (HCC) differentiation, pathological grading, and treatment response prediction and evaluation, prediction of postoperative recurrence and gene expression prediction. This study is a narrative review. Although there have been some similar reports, this study provides an important contribution to patho-physiological diagnosis of HCC. Above all, this study is well-designed. I agree the authors' insistence. This manuscript is well-written and illustrated. Basically, I have no major criticisms on the description. As a review article, the collected literatures are a little older. At least, the authors should discuss by referring the newest trials and reports. This review is interesting and important. However, the present manuscript needs some revisions for the publication of "World Journal of Gastroenterology".

Re: Dear Reviewer, thank you for handling the review of our manuscript and decision. We updated the literature and discussed by referring the newest trials and reports. In addition, we revised the present manuscript for the publication of "World Journal of Gastroenterology".

Reviewer #2:

Scientific Quality: Grade B (Very good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Accept (General priority)

Specific Comments to Authors: As research on IVIM-DWI in HCC increases, the authors of this review wrote a paper on the principle of IVIM-DWI and its progress in HCC differentiation, pathological grading, and treatment response prediction and evaluation, prediction of postoperative recurrence and gene expression prediction. The topic is interesting and current. The authors showed that IVIM-DWI can accurately reflect tissue structures and has important application value for HCC differentiation. The results of this paper show that IVIM-DWI has important application value in the treatment and diagnosis of HCC. The main limitation of the studies done is the small number of patients, which requires further studies with larger series to reach a consensus on all parameters, but I think this review paper can help clinicians in everyday practice, especially clinicians who face problems in accurately diagnosing and treating HCC.

Re: Dear Reviewer, thank you for handling the review of our manuscript and decision. Recently, more related trials and reports have appeared.We studied those trials and reports and discussed by referring them in the present manuscript. We have revised the paper.

Re: The present manuscript is different from the article "Progress of intravoxel incoherent motion diffusion-weighted imaging in liver diseases" .The previous study reviewed the application of IVIM-DWI in a variety of common liver diseases, including hepatic fibrosis, noninvasive nonalcoholic fatty liver disease (NAFLD), and other diseases, as well as HCC, of course. However, the present manuscript focused the application of IVIM-DWI in HCC, and provided contribution to gene expression prediction, locoregional therapy (LRT),systemic therapy (tumor immunotherapy responses) evaluation, and patho-physiological diagnosis of HCC, which not covered or not comprehensive enough in the previous study. Recently, more related trials and reports have appeared.We studied those trials and reports and discussed by referring them in the present manuscript.

In addition, we cited the article, "Progress of intravoxel incoherent motion diffusion-weighted imaging in liver diseases" this time.
We modified all the figures and legends.Clarity should be with 300dpi. The alignment in one frame as A,B
Thank you very much!

4 LANGUAGE POLISHING REQUIREMENTS FOR REVISED MANUSCRIPTS SUBMITTED BY AUTHORS WHO ARE NON-NATIVE SPEAKERS OF ENGLISH

As the revision process results in changes to the content of the manuscript, language problems may exist in the revised manuscript. Thus, it is necessary to perform further language polishing that will ensure all grammatical, syntactical, formatting and other related errors be resolved, so that the revised manuscript will meet the publication requirement (Grade A).

Authors are requested to send their revised manuscript to a professional English language editing company or a native English-speaking expert to polish the manuscript further. When the authors submit the subsequent polished manuscript to us, they must provide a new language certificate along with the manuscript.

Once this step is completed, the manuscript will be quickly accepted and published online. Please visit the following website for the professional English language editing companies we recommend: https://www.wjgnet.com/bpg/gerinfo/240.

5 ABBREVIATIONS

In general, do not use non-standard abbreviations, unless they appear at least two times in the text preceding the first usage/definition. Certain commonly used abbreviations, such as DNA, RNA, HIV, LD50, PCR, HBV, ECG, WBC, RBC, CT, ESR, CSF, IgG, ELISA, PBS, ATP, EDTA, and mAb, do not need to be defined and can be used directly.

The basic rules on abbreviations are provided here:

(1) Title: Abbreviations are not permitted. Please spell out any abbreviation in the title.

(2) Running title: Abbreviations are permitted. Also, please shorten the running title to no more than 6 words.

(3) Abstract: Abbreviations must be defined upon first appearance in the Abstract. Example 1: Hepatocellular carcinoma (HCC). Example 2: Helicobacter pylori (H. pylori).

(4) Key Words: Abbreviations must be defined upon first appearance in the Key Words.

(5) Core Tip: Abbreviations must be defined upon first appearance in the Core Tip. Example 1: Hepatocellular carcinoma (HCC). Example 2: Helicobacter pylori (H. pylori)

(6) Main Text: Abbreviations must be defined upon first appearance in the Main Text. Example 1: Hepatocellular carcinoma (HCC). Example 2: Helicobacter pylori (H. pylori)

(7) **Article Highlights:** Abbreviations must be defined upon first appearance in the Article Highlights. Example 1: Hepatocellular carcinoma (HCC).

Example 2: Helicobacter pylori (H. pylori)

(8) Figures: Abbreviations are not allowed in the Figure title. For the Figure Legend text, abbreviations are allowed but must be defined upon first appearance in the text. Example 1: A: Hepatocellular carcinoma (HCC) biopsy sample; B: HCC-adjacent tissue sample. For any abbreviation that appears in the Figure itself but is not included

in the Figure Legend textual description, it will be defined (separated by semicolons) at the end of the figure legend. Example 2: BMI: Body mass index; US: Ultrasound.

(9) Tables: Abbreviations are not allowed in the Table title. For the Table itself, please verify all abbreviations used in tables are defined (separated by semicolons) directly underneath the table. Example 1: BMI: Body mass index; US: Ultrasound.

6 EDITORIAL OFFICE'S COMMENTS

Authors must revise the manuscript according to the Editorial Office's comments and suggestions, which are listed below:

(1) Science editor:

This manuscript explored the principles of IVIM-DWI and its advances in HCC differentiation, pathological grading, prediction and assessment of treatment response, prediction of postoperative recurrence, and prediction of gene expression. It is suggested to add more details specific to this technique, conclusions about its use as diagnosis and treatment are detailed through more aspects of its application. Also, please add citations to the latest literature.
Language Quality: Grade B (Minor language polishing)
Scientific Quality: Grade C (Good)

Re: Dear Editor, thank you for handling the review of our manuscript and decision. Yes, we added details specific to this technique, conclusions about its use as diagnosis and treatment are detailed through more aspects of its application, and added citations to the latest literature.

(2) Company editor-in-chief:

I have reviewed the Peer-Review Report, full text of the manuscript, and the relevant ethics documents, all of which have met the basic publishing requirements of the World Journal of Gastroenterology, and the manuscript is conditionally accepted. I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report, Editorial Office's comments and the Criteria for Manuscript Revision by Authors. Please be sure to use Reference Citation Analysis (RCA) when revising the manuscript. RCA is an artificial intelligence technology-based open multidisciplinary citation analysis database. For details on the RCA, please visit the following web site: https://www.referencecitationanalysis.com/. Please provide decomposable Figures (in which all components are movable and editable), organize them into a single PowerPoint file. Please authors are required to provide standard three-line tables, that is, only the top line, bottom line, and column line are displayed, while other table lines are hidden. The contents of each cell in the table should conform to the editing specifications, and the lines of each row or column of the table should be aligned. Do not use carriage returns or spaces to replace lines or vertical lines and do not segment

Re: Dear Editor, thank you all for handling the review of our manuscript and decision. Based on your highly constructive comments and suggestions, we have addressed all of your comments and suggestions.
We used the Reference Citation Analysis (RCA) when revising the manuscript. I applied for an account.It is a very good citation analysis database, and convenient to use. I found a number of new trials and reports through the system and discussed by referring them in the present manuscript.
We provided decomposable Figures, and organize them into a single PowerPoint file. We revised all the tables based on your constructive comments and suggestions. We provided standard three-line tables.
We confirmed that the figures are original and added the copyright information to the bottom right-hand side of the picture in PowerPoint (PPT): Copyright ©The Author(s) 2022.

7 STEPS FOR SUBMITTING THE REVISED MANUSCRIPT

Step 1: Author Information

Please click and download the Format for authorship, institution, and corresponding author guidelines, and further check if the authors names and institutions meet the requirements of the journal.

Step 2: Manuscript Information

Please check if the manuscript information is correct.

Step 3: Abstract, Main Text, and Acknowledgements

(1) Guidelines for revising the content: Please download the guidelines for Original articles, Review articles, or Case Report articles for your specific manuscript type (Minireviews) at: https://www.wjgnet.com/bpg/GerInfo/291. Please further revise the content your manuscript according to the Guidelines and Requirements for Manuscript Revision.

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(4) Common issues in revised manuscript. Please click and download the List of common issues in revised manuscripts by authors and comments (PDF), and revise the manuscript accordingly.

Step 4: References

Please revise the references according to the Format for References Guidelines, and be sure to edit the reference using the reference auto-analyser.

Reminder: It is unacceptable to have more than 3 references from the same journal. To resolve this issue and move forward in the peer-review/publication process, please revise your reference list accordingly.

Step 5: Footnotes and Figure Legends

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(2) Requirements for Tables: Please provide decomposable Tables (in which all components are movable and editable), organize them into a single Word file, and submit as "**74629-Tables.docx**" on the system. The tables should be uploaded to the file destination of "Table File".

Reminder: Please click and download the Guidelines for preparation of bitmaps, vector graphics, and tables in revised manuscripts (PDF), and prepare the figures and tables of your manuscript accordingly.

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Best regards,

Lian-Sheng Ma, Editorial Office Director, Company Editor-in-Chief, Editorial Office

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suggestions, we have addressed all of your comments and suggestions. We have revised the paper, and make a point-to-point response to the issues raised in the peer review report.