

PEER-REVIEW REPORT

Name of journal: *World Journal of Gastrointestinal Surgery*

Manuscript NO: 76674

Title: Individualized risk estimation for postoperative pulmonary complications after hepatectomy based on perioperative variables

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 04423126

Position: Editorial Board

Academic degree: FACS

Professional title: Chief Doctor, Professor

Reviewer's Country/Territory: Germany

Author's Country/Territory: China

Manuscript submission date: 2022-03-25

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-04-08 04:53

Reviewer performed review: 2022-04-08 05:16

Review time: 1 Hour

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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 Grade E: Do not publish |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 |



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**Peer-reviewer
statements**

Peer-Review: [☒] Anonymous [☐] Onymous

Conflicts-of-Interest: [☐] Yes [☒] No

SPECIFIC COMMENTS TO AUTHORS

This is a very interesting study. A valid score with clinical relevance was established. Nowadays, it is becoming more and more possible to predict certain postoperative developments. However, clinical relevance should always arise from these predictions. I still miss that in this manuscript.

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Peer-review model: Single blind

Reviewer's code: 02726183

Position: Editorial Board

Academic degree: FACS, MD, PhD

Professional title: Director, Full Professor, Surgeon

Reviewer's Country/Territory: Serbia

Author's Country/Territory: China

Manuscript submission date: 2022-03-25

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-04-15 13:04

Reviewer performed review: 2022-04-18 22:28

Review time: 3 Days and 9 Hours

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

In the Ms. authors suggests the liver operation pulmonary complication scoring system (LOPCSS), to assess the risk of pulmonary complications after liver resections. Congratulations to the authors on their efforts. However, I have some objections: the methodology is not clear enough especially when it comes to determining the score. If the calculation is almost complicated, I'm afraid, that surgeons don't like to calculate. On the other hand, what do you think is the practical value of the score you suggest, since preventive measures to reduce postop pulmonary complications are standard in perioperative care of these patients?

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Peer-review model: Single blind

Reviewer's code: 05908713

Position: Peer Reviewer

Academic degree: MD

Professional title: Academic Fellow, Surgeon

Reviewer's Country/Territory: Italy

Author's Country/Territory: China

Manuscript submission date: 2022-03-25

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-04-21 15:52

Reviewer performed review: 2022-05-02 08:23

Review time: 10 Days and 16 Hours

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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 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 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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|-------------------------------------|---|
| Peer-reviewer statements | Peer-Review: [<input checked="" type="radio"/>] Anonymous [<input type="radio"/>] Onymous Conflicts-of-Interest: [<input type="radio"/>] Yes [<input checked="" type="radio"/>] No |
|-------------------------------------|---|

SPECIFIC COMMENTS TO AUTHORS

I read with great interest the article about "Individualized risk estimation for postoperative pulmonary complications after hepatectomy based on perioperative variables". I find it quite innovative and interesting, however some major concerns arise:

-the introduction must be shortened, and I think that liver surgery is not so recent and less developed as the author say. That part should be removed. -what the author mean in the inclusion criteria when they write "perioperative patients"? please explain -did you analyze also the impact of minimally invasive approach and the impact of tumor position? Do you think that resecting 2 segments (that is the cut off you choose for analysis) of the left lobe (i.e. laparoscopic LLS) is equal of a resection of segment 6-7 or 7-8, in terms of pulmonary complications? Considering the retraction of costal bones for right liver, the possibility of diaphragm involvement and so on? -validation cohort was it internal or external? If internal, why you didn't use an external validation that is more reliable? -laparoscopic liver surgery has been showed to give less postoperative pulmonary complications. You should mention it. -the limitations of the study should be listed in the discussion