



PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 76702

Title: Infant biliary cirrhosis secondary to a biliary inflammatory myofibroblastic tumor:
A case report and review of literature

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05424290

Position: Editorial Board

Academic degree: MBBS, MD

Professional title: Academic Research, Doctor, Professor

Reviewer's Country/Territory: India

Author's Country/Territory: China

Manuscript submission date: 2022-03-30

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-04-06 08:46

Reviewer performed review: 2022-04-17 12:30

Review time: 11 Days and 3 Hours

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 Grade E: Do not publish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 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
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SPECIFIC COMMENTS TO AUTHORS

The case reports a 10-month infant presenting with obstructive jaundice diagnosed as biliary IMT. I have few suggestions and comments to make. 1. Authors should describe the history in detail as onset and duration of jaundice, associated symptoms of appetite loss/ irritability, clay colored stools, symptoms of cholestasis. 2. Whether jaundice appeared at birth and progressed thereafter or not. 3. As biliary atresia, PFIC, neonatal viral infections are more common causes of jaundice in 1st year of life, they need to be ruled out through history and appropriate investigations. 4. IMT was suspected after exploratory laparotomy, therefore, before the laparotomy what was their clinical diagnosis which inspired them to take patient for surgical exploration.



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Peer-review model: Single blind

Reviewer's code: 03646555

Position: Peer Reviewer

Academic degree: FRACP, MBBS

Professional title: Attending Doctor, Lecturer, Staff Physician

Reviewer's Country/Territory: Australia

Author's Country/Territory: China

Manuscript submission date: 2022-03-30

Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-05-15 00:33

Reviewer performed review: 2022-05-15 01:00

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
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Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No



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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
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SPECIFIC COMMENTS TO AUTHORS

Generally an excellent manuscript. However I feel the introduction and discussion sections are too long and should be broken up into smaller paragraphs for ease of reading. Furthermore, there should be greater description of the details and outcomes of the Kasai procedure. There should be inclusion of ultrasound or MRI images displaying the lesion. There are a few language issues; e.g. the word "imageological" (not a true English word), "hypoecho" (not a true English word), "Amy Inji Chang and her colleges" (should be "Chang et al", we do not refer to authors by their full names in scientific writing convention), "it's noninvasive" (should be "it is non-invasive") There are some vague sentences such as "Routine medical treatment had poor effect" and "After treatment was administered to protect the liver and lower the levels of aminotransaminase, the symptoms were relieved tentatively". What treatment is being referred to here?



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Reviewer's code: 02936184

Position: Editorial Board

Academic degree: MBChB, MD, MRCP, MSc

Professional title: Consultant Physician-Scientist, Professor

Reviewer's Country/Territory: United Kingdom

Author's Country/Territory: China

Manuscript submission date: 2022-03-30

Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-05-09 19:59

Reviewer performed review: 2022-05-21 22:25

Review time: 12 Days and 2 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 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="checkbox"/>] Anonymous [<input type="checkbox"/>] Onymous Conflicts-of-Interest: [<input type="checkbox"/>] Yes [<input checked="" type="checkbox"/>] No
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SPECIFIC COMMENTS TO AUTHORS

Dear Authors: Thank you for submitting this case report. I have some comments that need to be reviewed:

- Introduction should be divided into paragraphs, not as one block.
- hypoecho of the surrounding tissues ??? what is the echogenicity of the liver and the lesion itself?
- after more than ten days of ineffective treatment for jaundice: what is the treatment given for jaundice?
- Physical examination showed mild jaundice of the skin and sclera, and hepatomegaly. This is very deficient description; the term hepatomegaly is vague: how many cm below costal margin? Is it left or right lobe? Is it tender or non-tender? Is it soft or firm or hard? smooth surface or irregular? What was the comment on spleen examination? Splenomegaly? Dull Traube's area? was there ascites?
- Laboratory examinations: no mention regarding platelets level, albumin and total proteins, ALP, GGT, AFP, CA 19-9, ESR, viral hepatitis and autoimmune liver work-up
- Imaging: Ultrasound report is very defective: no mention of liver size, echogenicity, status of intrahepatic ducts and CBD, presence of any hepatic focal lesions? If cystic lesion was detected by follow-up ultrasound, why CT scan was not performed?
- Exploratory laparotomy and pathology: there is no mention of what has been excised and the details of the surgical intervention was not mentioned?
- After treatment was administered to protect the liver and lower the levels of aminotransaminase: which treatment has been given?
- There is no explanation of the cirrhosis; if the presentation was of 2 months duration, it is unlikely to develop cirrhosis.