

## PEER-REVIEW REPORT

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

**Manuscript NO:** 84185

**Title:** Preoperative prediction of microvascular invasion in hepatocellular carcinoma using ultrasound features including elasticity

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

**Peer-review model:** Single blind

**Reviewer's code:** 06078839

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Associate Professor

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

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

**Manuscript submission date:** 2023-05-24

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2023-05-26 00:45

**Reviewer performed review:** 2023-06-08 10:17

**Review time:** 13 Days and 9 Hours

|                                             |                                                                                                                                                                                                                                      |
|---------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Scientific quality                          | <input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good<br><input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish |
| Novelty of this manuscript                  | <input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair<br><input type="checkbox"/> Grade D: No novelty                                                 |
| Creativity or innovation of this manuscript | <input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair<br><input type="checkbox"/> Grade D: No creativity or innovation                                |

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| <b>Scientific significance of the conclusion in this manuscript</b> | <input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair<br><input type="checkbox"/> Grade D: No scientific significance                                         |
| <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)<br><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 statements</b>                                     | Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous                                                                                                                                                  |
|                                                                     | Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                   |

## SPECIFIC COMMENTS TO AUTHORS

Preoperative imaging including contrast enhanced CT and contrast-enhanced MRI may help in the diagnosis of microvascular invasion. With regard to ultrasonography, related studies have focused on contrast-enhanced ultrasound. Compared with CEUS, contrast-enhanced CT or MRI, SWE has the advantages of the absence of contrast agent allergy, is less expensive and less time-consuming. In this study, the authors explored the value of conventional ultrasound features and SWE in the preoperative prediction of MVI in HCC. The study is well designed and the manuscript is well written. 1. The manuscript should be edited and improved. Some spelling mistakes should be corrected. 2. The title is too long, please short it. 3. The discussion should be improved. Please focus on the main results.

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**Peer-review model:** Single blind

**Reviewer's code:** 06143422

**Position:** Peer Reviewer

**Academic degree:** MD, PhD

**Professional title:** Associate Professor, Research Assistant

**Reviewer's Country/Territory:** United States

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

**Manuscript submission date:** 2023-05-24

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2023-05-30 00:45

**Reviewer performed review:** 2023-06-12 00:43

**Review time:** 12 Days and 23 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<br><input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish |
| Novelty of this manuscript                  | <input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair<br><input type="checkbox"/> Grade D: No novelty                                                 |
| Creativity or innovation of this manuscript | <input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair<br><input type="checkbox"/> Grade D: No creativity or innovation                                |

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|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Scientific significance of the conclusion in this manuscript</b> | <input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair<br><input type="checkbox"/> Grade D: No scientific significance                                         |
| <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)<br><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 statements</b>                                     | Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous                                                                                                                                                  |
|                                                                     | Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                   |

#### SPECIFIC COMMENTS TO AUTHORS

This study of values of conventional ultrasound features and shear wave elastography in preoperative prediction of microvascular invasion in HCC is very interesting. The reviewer read this manuscript with great interest. Overall, the manuscript is well written, and the results are informative and well discussed. After a minor editing, the manuscript can be accepted in the journal.