

PEER-REVIEW REPORT

Name of journal: *World Journal of Gastrointestinal Surgery*

Manuscript NO: 89354

Title: Comparison of different preoperative objective nutritional indices for evaluating 30-day mortality and complications after liver transplantation

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05562744

Position: Editorial Board

Academic degree: FACS, MD, PhD

Professional title: Professor, Senior Scientist

Reviewer's Country/Territory: Turkey

Author's Country/Territory: China

Manuscript submission date: 2023-10-29

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-11-12 15:29

Reviewer performed review: 2023-11-24 09:21

Review time: 11 Days and 17 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 Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <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 <input type="checkbox"/> Grade D: No creativity or innovation

Scientific significance of the conclusion in this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
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 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
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

SPECIFIC COMMENTS TO AUTHORS

Breifly, This study identified several independent risk factors associated with 30-day mortality, including blood loss, prognostic nutritional index (PNI), nutritional risk index (NRI), and control nutritional status (CONUT). The 30-day mortality rate was 8.6%. Blood loss, NRI, and PNI were found to be independent risk factors for the occurrence of severe postoperative complications. The NRI achieved the highest prediction values for 30-day mortality (AUC = 0.861, $P < 0.001$) and severe complications (AUC = 0.643, $P = 0.011$). Compared to the high NRI group, the low NRI group had lower preoperative BMI and prealbumin and albumin levels, as well as higher alanine aminotransferase (ALT), total bilirubin, Model for End-stage Liver Disease (MELD) score and prothrombin time (PT) levels ($P < 0.05$). Furthermore, the group with a low NRI exhibited significantly higher incidences of intraabdominal bleeding, primary graft nonfunction, and mortality. Although the results are not surprising, the study is well designed and written professionally. It may benefit from English revision