PEER-REVIEW REPORT

Name of journal: *World Journal of Hepatology*

Manuscript NO: 80133

Title: Current status and prospect of treatments for recurrent hepatocellular carcinoma

Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 01221925

Position: Editorial Board

Academic degree: AGAF, FACS, FICS, MD, PhD

Professional title: Professor

Reviewer's Country/Territory: Greece

Author's Country/Territory: China

Manuscript submission date: 2022-09-18

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-09-18 09:59

Reviewer performed review: 2022-09-22 20:18

Review time: 4 Days and 10 Hours

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Novelty of this manuscript	[ ] Grade A: Excellent [ ] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No novelty
Creativity or innovation of this manuscript	[ ] Grade A: Excellent [ ] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No creativity or innovation

Scientific significance of the conclusion in this manuscript	[ ] Grade A: Excellent [ ] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No scientific significance
Language quality	[ ] Grade A: Priority publishing [ ] Grade B: Minor language polishing [Y] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	[ ] Accept (High priority) [ ] Accept (General priority) [ ] Minor revision [Y] Major revision [ ] Rejection
Re-review	[ ] Yes [Y] No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [ ] Onymous
	Conflicts-of-Interest: [ ] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

This is an interesting paper discussing the issue of HCC recurrence management. Could the authors please respond to the following questions/comments? 1) The authors list the different treatments for HCC but not resection and transplantation in the first section 2) The authors may want to consider presenting an algorithm regarding the use of the different therapies

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
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Creativity or innovation of this manuscript	[ ] Grade A: Excellent [ ] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No creativity or innovation

Scientific significance of the conclusion in this manuscript	[ ] Grade A: Excellent [ ] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No scientific significance
Language quality	[ ] Grade A: Priority publishing [Y] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	[ ] Accept (High priority) [ ] Accept (General priority) [ ] Minor revision [Y] Major revision [ ] Rejection
Re-review	[Y] Yes [ ] No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [ ] Onymous
	Conflicts-of-Interest: [ ] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

The authors have submitted a well-written review of treatment strategies for recurrent HCC. While the work is meaningful, given below are my comments in no particular order: 1. Several sections of the manuscript have very little references e.g. the first part of pathological factors has zero references.   2. Kindly run Grammarly, a free tool, prior to resubmission in order to ensure the minor mistakes present are corrected.   3. Consider explaining the current prediction models for predicting HCC recurrence.   A newly   published   one   is https://www.diagnosticimaging.com/view/machine-learning-mri-model-may-help-predict-recurrence-of-hepatocellular-carcinoma   4. Role of MRI has not been discussed. Please incorporate data on MRI and recurrent HCC.   Min JH, Kim YK, Choi SY, et al. Detection of recurrent hepatocellular carcinoma after surgical resection: Non-contrast liver MR imaging with diffusion-weighted imaging versus gadoxetic acid-enhanced MR imaging. Br J Radiol. 2018;91(1090):20180177. doi:10.1259/bjr.20180177   Lee MW, Lim HK. Management of sub-centimeter recurrent hepatocellular carcinoma after curative treatment: Current status and future. World J Gastroenterol. 2018;24(46):5215-5222.

doi:10.3748/wjg.v24.i46.5215   5. Please provide a simplified management protocol as a figure as well. This will considerably enhance value of your manuscript.   6. Please remove the section of Other Therapies. This section strongly decreases the scientific trustworthiness of your manuscript.   7. Please spend more time discussing actual clinical data rather than just describing basic sciences or describing that this tool may be useful - let the reader make the judgement. Several key studies on RFA, MWA have not been discussed.

RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: *World Journal of Hepatology*

Manuscript NO: 80133

Title: Current status and prospect of treatments for recurrent hepatocellular carcinoma

Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05467628

Position: Peer Reviewer

Academic degree: MBBS

Professional title: Doctor, Research Fellow

Reviewer's Country/Territory: United States

Author's Country/Territory: China

Manuscript submission date: 2022-09-18

Reviewer chosen by: Jing-Jie Wang

Reviewer accepted review: 2022-11-14 13:44

Reviewer performed review: 2022-11-14 13:57

Review time: 1 Hour

Scientific quality	[ ] Grade A: Excellent [Y] Grade B: Very good [ ] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Language quality	[ ] Grade A: Priority publishing [Y] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	[ ] Accept (High priority) [ ] Accept (General priority) [Y] Minor revision [ ] Major revision [ ] Rejection
Peer-reviewer statements	Peer-Review: [Y] Anonymous [ ] Onymous Conflicts-of-Interest: [ ] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

I thank the authors for carefully engaging in the peer-review process. However, there are some considerations. 1. Authors should upload a file that has tracked changes so that the reviewer can review the changes they have made. 2. Manuscript contains errors that need manual rectification. I advise authors to print the manuscript and have it read slowly to identify glaring errors. E.g. "Similarly, with the demarcation line being set at 2 years, HCC recurrence after liver transplantation can be divided into early and recurrence. " This sentence is missing the word "LATE" 3.Significant advances have been made in adjuvant chemotherapy including several major results presented at ASCO in 2022, 2021 and 2020. Please incorporate data from these trials and discuss specific agents. Please upload tracked changes file comparing all changes made compared to initial submission.