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# PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Surgery

Manuscript NO: 82520

Title: Pain management in patients with hepatocellular carcinoma after transcatheter

arterial chemoembolisation: A retrospective study

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 02731847 Position: Editorial Board Academic degree: MD, MSc

Professional title: Associate Professor, Staff Physician

Reviewer's Country/Territory: Brazil

Author's Country/Territory: China

Manuscript submission date: 2022-12-21

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-12-21 13:32

Reviewer performed review: 2022-12-23 18:21

**Review time:** 2 Days and 4 Hours

Scientific quality	[ ] Grade A: Excellent [Y] Grade B: Very good [ ] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish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) [Y] Accept (General priority) [ ] Minor revision [ ] Major revision [ ] Rejection
Re-review	[ ]Yes [Y]No



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Peer-reviewer	Peer-Review: [Y] Anonymous [ ] Onymous
statements	Conflicts-of-Interest: [ ] Yes [Y] No

# SPECIFIC COMMENTS TO AUTHORS

This is a very interesting paper, using ML to predict an outcome, with consistent results. I recommend acceptance.



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Reviewer's code: 03724988 Position: Editorial Board Academic degree: MD

**Professional title:** Assistant Professor

Reviewer's Country/Territory: Italy

Author's Country/Territory: China

Manuscript submission date: 2022-12-21

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-12-21 08:57

**Reviewer performed review: 2023-01-01 18:43** 

**Review time:** 11 Days and 9 Hours

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	[ ] Grade D: Fair [ ] Grade E: Do not publish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



# Baishideng

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Scientific significance of the conclusion in this manuscript	[ ] Grade A: Excellent [Y] 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	[ ]Yes [Y]No
Peer-reviewer statements	Peer-Review: [ ] Anonymous [ Y] Onymous  Conflicts-of-Interest: [ ] Yes [ Y] No

### SPECIFIC COMMENTS TO AUTHORS

I read this paper about the prediction of post-operative pain in TACE with interest. The Authors used an artificial intelligence application to develop a model able to predict the occurence of severe pain after TACE. Despite the use of IA, the topic is not entirely novel. On the other hand, the authors provided a validation cohort, which is a strenght of this study. I have some concerns: 1) General comment: Even if the authors provided an Eglish language certificate, many obvious errors are still fount throghout the text (for instance "mid-term" HCC instead of "intermediate, "TACE surgery", etc). I suggest to perform a further language revision; 2) Study population: I fail to see how a prospective population from the same hospital which enorlled the patients in a the retrospective phase can be considered an "external time-space validation". Time maybe, 3) Study population: it is not clear how the January 2020 deadline was but not space. chosen. Was this a prospective/retrospective study which was approved by the IRB on that date? Please clarify. How could the patients enrolled in the retrospective cohort provide an informed consent, considering that many of the were probaby dead at the time of the study? Finally, please provide an Eglish translation of the IRB approval. 4)



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Methods: please integrate your information by creating a paragraph titled "Pain mangement", in which the pain-management protocol is described (please report whether the patients received corticosteorids as part of the protocol and whether the pain-management protocols changed between 2016 and 2022) 5) Discussion, Line 282: embolization of nodules close to the gallbladder might also be an alternative cuase of pain, especially if cystic artery vessels provided bllod to the nodules and had to be embolized. 6) Discussion, Line 324: the whole discussion about coagulation is not convincing nor supported by referenced literature. Plesase find some reference to support these statement or tone down this hypothesis.