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PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 86090

Title: Pitfalls and promises of bile duct alternatives: There is plenty of room in the

regenerative surgery

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05247020 Position: Peer Reviewer Academic degree: PhD

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: Russia

Manuscript submission date: 2023-05-31

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-06-20 06:46

Reviewer performed review: 2023-06-22 13:48

Review time: 2 Days and 7 Hours

[] Grade A: Excellent [Y] Grade B: Very good [] Grade C:
Good
[] Grade D: Fair [] Grade E: Do not publish
[] Grade A: Excellent [Y] Grade B: Good [] Grade C: Fair [] Grade D: No novelty
[] Grade A: Excellent [Y] Grade B: Good [] Grade C: Fair
[] Grade D: No creativity or innovation



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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) [Y] Minor revision [] 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 submitted a letter to the editor discussing the challenges and potential solutions in creating bile duct substitutes for biliary reconstruction in abdominal surgery. Research and development of artificial biliary substitutes is an indispensable part of modern biliary surgery, bearing great clinical significance on the recovery of the normal functions of the biliary system. Although research has been conducted for over 100 years to directly repair bile duct defects with alternatives, no bile duct substitute has been developed. The implantation of artificial biliary substitutes may cause the blockage or stenosis of the biliary duct at the transplantation site, which is the most urgent problem in the research of artificial biliary substitutes. The authors suggest that a systematic analysis of factors leading to success or failure in creating bile duct substitutes, quantitative models to estimate outcomes, and the use of endogenous regeneration abilities of the organism may help in developing more effective approaches. They emphasize the need for an interdisciplinary approach, including quantitative methods and retrospective analysis, to pave the way for bile duct restoration with physiologically relevant outcomes. Overall, this manuscript is better designed, written, and the logic



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is clear. Individual English errors need to be corrected.



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Academic degree: BSc, MSc, PhD

Professional title: Assistant Professor, Research Fellow

Reviewer's Country/Territory: China

Author's Country/Territory: Russia

Manuscript submission date: 2023-05-31

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-06-21 07:07

Reviewer performed review: 2023-06-26 04:39

Review time: 4 Days and 21 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] 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
Re-review	[Y]Yes []No



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

SPECIFIC COMMENTS TO AUTHORS

[In brief, my comments were related to this being a 'Letter to the Editor' style manuscript, and thus, should offer more insights and further the discussion presented in the manuscript the authors are commenting on. The abstract should not include references, the Figure has a white space that could very easily be filled by the topic the authors fail to touch on: biomaterials and tissue engineering advancements for bile duct replacements. Indeed, a discussion around this alternative route for regenerating bile duct tissues could provide 'meet-in-the-middle' approach from the surgical, physiologists, and engineers perspectives. I suggest the authors to carefully read the literature around such topics to bolster their discussion and offer further insights into strategies moving forward.]