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PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 37513

Title: Analysis of aggressiveness factors in Hepatocellular carcinoma patients undergoing transarterial chemoembolization

Reviewer's code: 00182114

Reviewer's country: Japan

Science editor: Ya-Juan Ma

Date sent for review: 2018-01-04

Date reviewed: 2018-01-06

Review time: 1 Day

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input type="checkbox"/> No	

COMMENTS TO AUTHORS

This is very interesting paper about TAE for HCC. Author concluded that aggressiveness index (MTD,AFP,PVT and Nodules) was strongly correlated with survival in TAE for HCC. I ask some question. According to author's discussion, a study of 109 patients who underwent TACE from 2006 to 2012, did not show any single component of Child-Pugh score which includes bilirubin was a predictor of survival (28). But in Japan ,Child-Pugh and K-ICG are predictive factor for TAE for HCC. Please tell me your data about Child-Pugh score ,single component of Child-Pugh and the prognosis of TAE for HCC.

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 37513

Title: Analysis of aggressiveness factors in Hepatocellular carcinoma patients undergoing transarterial chemoembolization

Reviewer's code: 00054255

Reviewer's country: South Korea

Science editor: Ya-Juan Ma

Date sent for review: 2018-01-04

Date reviewed: 2018-01-12

Review time: 8 Days

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

The papers regarding correlation between 'aggressiveness index of hepatocellular carcinoma'(AgI) using 4 parameters, maximum tumor diameter, AFP, presence or absence of PVT and the number of tumors were published already(Ref number 15,16 and 17) and laboratory parameters. This paper analyzed the relation between AgI and 8 laboratory parameters, albumin, ALP, GTP, AST, bilirubin, platelets, WBC and lymphocyte. It is well known that the prognosis of HCC depends on both tumor aggressiveness and liver function, so that degree of cirrhosis. The parameters composing of laboratory parameters(albumin, bilirubin and platelets) are related liver function, some like GPT, AST and ALP are not related with liver function but ongoing liver injury, WBC and lymphocyte are not relevant to liver function. Can authors explain the meaning or hypothesis why the 5 irrelevant parameters included for this

analysis. Another consideration is that why authors didn't use other factors better reflecting liver function including prothrombin time, and ICG clearance test that reflects very well of degree of cirrhosis. Reviewer also have question about the authors excluded variants of HCC such as combined cholangiocarcinoma or sarcomatous variants, both are more aggressive than ordinary HCC. Another is DCP or PIVKA II as a tumor marker. This is more sensitive for early detection and better marker rather than a-FP in some reports.