

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 39725

Title: Differentiation of Intrahepatic Cholangiocarcinoma from Hepatocellular Carcinoma in High-Risk Patients: A Predictive Model using Contrast-Enhanced Ultrasound

Reviewer's code: 02441332

Reviewer's country: Italy

Science editor: Ze-Mao Gong

Date sent for review: 2018-05-07

Date reviewed: 2018-05-08

Review time: 1 Day

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input checked="" type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input checked="" type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

The paper is a retrospective study aiming to develop a CEUS predictive model to distinguish intrahepatic cholangiocarcinoma (ICC) from hepatocellular carcinoma (HCC)



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in high-risk patients. The topic is of interest considering the clinical relevance of the distinction and the controversial role of CEUS in this setting. The paper is overall well written. The following comments should be addressed: Major comments General The retrospective nature of the study is a limitation and the achieved results should be confirmed in a large prospective trial before drawing any definitive conclusion. Also, as mentioned in the discussion, the Authors did not compare the diagnostic performance of CEUS with that of MRI/CT due to the large number of scans missing the delayed phase. This is a particularly relevant limitation of the study given that MRI/CT scans must be performed in clinical practice according to international guidelines. The Authors should clearly discuss these weaknesses of the study. Materials and Methods Patients The Authors reported that over a 12 year-period they enrolled 400 consecutive patients with ICC and 2818 with HCC who underwent both baseline US and CEUS. Unfortunately, only 88 patients with ICC (and 1792 patients with HCC) were evaluable for the purpose of the study, and this decreases the strength of the study. Also, 2/3 of the patients were randomly assigned to the training dataset and 1/3 to the validation dataset, further decreasing the power of the analysis. These aspects should be acknowledged as limitations of the study in the discussion. Results CEUS Features Distinguishing ICC from HCC Given that the interobserver reproducibility of the CEUS features assessment was deemed high, the Authors based the analysis on the records of the first radiologist. The Authors should clarify why they decided to proceed this way. In fact, this is quite risky/dangerous and should be acknowledged as a weakness of the study in the discussion. Discussion The developed model was shown to work only for larger tumors (>3 cm). This is a limitation for the usefulness of the model itself given that smaller tumors are the most difficult to distinguish. Also, based on this result the Authors concluded that "The result reflects our opinion that CEUS may cause a false-positive HCC diagnosis in patients with ICC in small lesions rather than 3-cm

lesions in high-risk patients". They should clarify where this conclusion comes from.
Minor comments General "CA-199" should be "CA 19-9" Key points Second
paragraph: "The diagnostic performance..." should be "The diagnostic performance..."

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

BPG Search:

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 39725

Title: Differentiation of Intrahepatic Cholangiocarcinoma from Hepatocellular Carcinoma in High-Risk Patients: A Predictive Model using Contrast-Enhanced Ultrasound

Reviewer's code: 02939490

Reviewer's country: China

Science editor: Ze-Mao Gong

Date sent for review: 2018-05-07

Date reviewed: 2018-05-11

Review time: 4 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
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		<input type="checkbox"/> Rejection	<input checked="" type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

This study by Chen and co-worker aimed to develop a contrast-enhanced ultrasound (CEUS) predictive model for distinguishing intrahepatic cholangiocarcinoma (ICC) from



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hepatocellular carcinoma (HCC) in high-risk patients. The authors provide convincing evidences that the CEUS score nomogram which added the clinical risk factors was superior to the LI-RADS nomogram. The presented experiments are straightforward. The conclusion is clear and supported by the data. The authors have already discussed the limitations of this article in “Discussion” of the manuscript.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

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BPG Search:

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- ☐ Plagiarism
- ☐ No

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 39725

Title: Differentiation of Intrahepatic Cholangiocarcinoma from Hepatocellular Carcinoma in High-Risk Patients: A Predictive Model using Contrast-Enhanced Ultrasound

Reviewer's code: 03647881

Reviewer's country: Taiwan

Science editor: Ze-Mao Gong

Date sent for review: 2018-05-07

Date reviewed: 2018-05-14

Review time: 7 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
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			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

Dear professor Wang, This article "Differentiation of Intrahepatic Cholangiocarcinoma from Hepatocellular Carcinoma in High-Risk Patients: A Predictive

Model using Contrast-Enhanced Ultrasound" is an important reference in clinical practice for patients with advanced liver disease. However, some limitations need to be evaluated as author's mention in this manuscript. In addition, specimen from liver biopsy or surgery and selection of HCC group could affect present result. Thanks!

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BPG Search:

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- ☐ Plagiarism
- ☐ No