



**PEER-REVIEW REPORT**

**Name of journal:** World Journal of Hepatology

**Manuscript NO:** 40116

**Title:** African Americans Are Less Likely to Receive Curative Treatment for Hepatocellular Carcinoma

**Reviewer’s code:** 02527494

**Reviewer’s country:** Japan

**Science editor:** Fang-Fang Ji

**Date sent for review:** 2018-06-02

**Date reviewed:** 2018-06-11

**Review time:** 9 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:
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good		<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	(General priority)	Peer-reviewer’s expertise on the topic of the manuscript:
<input type="checkbox"/> Grade E: Do not publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Minor revision	<input checked="" type="checkbox"/> Advanced
		<input checked="" type="checkbox"/> Major revision	<input type="checkbox"/> General
		<input type="checkbox"/> Rejection	<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

**SPECIFIC COMMENTS TO AUTHORS**

The manuscript by Sobotka L, et al. entitled, “African Americans Are Less Likely to Receive Curative Treatment for Hepatocellular Carcinoma” suggests that disparities in the treatment of HCC based on patient race still exist despite emphasis to decrease



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disparities in healthcare. In general, the theme of this article is interesting. However, this study has several major flaws, which are noted below: Major point: 1. The authors adequately stated that “given we are not able to obtain laboratory values, we are unable to determine MELD score, therefore disease severity is defined by features of liver decompensation” in the Discussion section. How then could the authors obtain the data regarding the specific features of liver decompensation, such as jaundice, ascites, or hepatic coma? Please clarify this. In this context, the authors should describe these specific features of liver decompensation, such as jaundice, ascites, or hepatic coma, in Table 1. 2. It would be desirable for the authors to provide a deeper discussion on how we can change or eliminate disparities in the treatment of HCC based on patient race. Minor points 1. In the Methods section (Statistical Analysis), the authors should cite a reference in relation to the Elixhauser comorbidity score. 2. Although the authors classified patients into White, Black, Hispanic, and Other in Table 1, they classified them into African, American, Caucasian, Hispanic, Other, and Unknown in Tables 2, and 3. This is confusing. The authors should unify the description.

#### **INITIAL REVIEW OF THE MANUSCRIPT**

##### ***Google Search:***

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[ Y ] No



**PEER-REVIEW REPORT**

**Name of journal:** World Journal of Hepatology

**Manuscript NO:** 40116

**Title:** African Americans Are Less Likely to Receive Curative Treatment for Hepatocellular Carcinoma

**Reviewer’s code:** 00053888

**Reviewer’s country:** United Kingdom

**Science editor:** Fang-Fang Ji

**Date sent for review:** 2018-06-15

**Date reviewed:** 2018-06-15

**Review time:** 1 Hour

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 type="checkbox"/> Grade B: Minor language	(High priority)	<input type="checkbox"/> Anonymous
<input 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 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 type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input type="checkbox"/> No

**SPECIFIC COMMENTS TO AUTHORS**

This is a well written manuscript addressing a very important issue. The study is very large and retrospective but carries a very important message. This study should be published in its current format.



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#### INITIAL REVIEW OF THE MANUSCRIPT

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**PEER-REVIEW REPORT**

**Name of journal:** World Journal of Hepatology

**Manuscript NO:** 40116

**Title:** African Americans Are Less Likely to Receive Curative Treatment for Hepatocellular Carcinoma

**Reviewer's code:** 00068723

**Reviewer's country:** Japan

**Science editor:** Fang-Fang Ji

**Date sent for review:** 2018-06-15

**Date reviewed:** 2018-06-16

**Review time:** 16 Hours

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 polishing	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input checked="" type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	(General priority)	Peer-reviewer's expertise on the topic of the manuscript:
<input type="checkbox"/> Grade E: Do not publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Minor revision	<input type="checkbox"/> Advanced
		<input checked="" type="checkbox"/> Major revision	<input checked="" type="checkbox"/> General
		<input type="checkbox"/> Rejection	<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

**SPECIFIC COMMENTS TO AUTHORS**

The authors investigated differences of treatment of HCC among races. They found out that African American patients were less likely to receive treatments as compared with other races. The results were interesting, and suggestive of healthcare systems as one of



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the reasons. Data were reliable because nation-wide survey of HCC was analyzed. The database included a large number of patients. On the other hand, logical flow from the results to the conclusion was not clear. Table 1 showed factors different among the races, such as age, private payer, insurance, geographic region, and others. These data should be analyzed to explain the disparity of treatment among the races. For example, multivariate analysis would be one of the choices. Stages of HCC might affect the results of the study. Were there any data on the stages? For example, size and numbers of HCC, and liver function. These factors may limit the choice of treatment of HCC.

#### **INITIAL REVIEW OF THE MANUSCRIPT**

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##### ***BPG Search:***

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**PEER-REVIEW REPORT**

**Name of journal:** World Journal of Hepatology

**Manuscript NO:** 40116

**Title:** African Americans Are Less Likely to Receive Curative Treatment for Hepatocellular Carcinoma

**Reviewer’s code:** 00051373

**Reviewer’s country:** Taiwan

**Science editor:** Fang-Fang Ji

**Date sent for review:** 2018-06-15

**Date reviewed:** 2018-06-16

**Review time:** 21 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	<input checked="" type="checkbox"/> Accept	Peer-Review:
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input 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 type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input 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 is a medical disparity in the real-world presentation. I also believed that this racial disparity is occurred in African American not only, but also in Asian American in the world. The author reported the racial disparities in the treatment of hepatocellular



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carcinoma as an example to determine if disparities continued to exist despite emphasis for equality in healthcare. African American patients remain less likely to undergo curative treatment for hepatocellular carcinoma. The current manuscript is well written and organized.

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**PEER-REVIEW REPORT**

**Name of journal:** World Journal of Hepatology

**Manuscript NO:** 40116

**Title:** African Americans Are Less Likely to Receive Curative Treatment for Hepatocellular Carcinoma

**Reviewer’s code:** 02438768

**Reviewer’s country:** China

**Science editor:** Fang-Fang Ji

**Date sent for review:** 2018-06-15

**Date reviewed:** 2018-06-18

**Review time:** 2 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:
<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
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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**

Comments for ESPS Manuscript NO 40116 This is an interesting study. In this study, a total of 62,604 patients with hepatocellular carcinoma(HCC), consisting of 32,428 Caucasian, 9,726 African American, 988 Hispanic, and 11,462 patients of other races,



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were analyzed. However, the authors classified patients into White (N=32,428), Black (N=9,726), Hispanic (N=8,988), and Other (N=11,462) in Table 1. The authors should change “White” to “Caucasian”, and change “Black” to “African-American”, which can be consistent with Table 2 and Table 3. In addition, as a compound adjective, African American is usually hyphenated as African-American, especially in Table 2 and Table 3. If not, it makes the readers feel that they are two separate names.

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