

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 46747

Title: Hepatocellular carcinoma surveillance: An evidence-based approach

Reviewer's code: 00032933

Reviewer's country: Taiwan

Science editor: Ruo-Yu Ma

Date sent for review: 2019-02-22

Date reviewed: 2019-02-24

Review time: 10 Hours, 2 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 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 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 incidence of HCC is increasing in US, so the author conducted this review to understand the necessity and role of HCC surveillance in the management of HCC. They agree that early diagnosis of HCC through surveillance programs improve prognosis and availability of curative therapies. Patients with cirrhosis and high-risk hepatitis B

patients are at risk for HCC and should undergo surveillance. They recommend abdominal ultrasound (US) and AFP in semiannual screening. Comments: 1. The is an extensive evident-based review, well-written and cover most of the fundamental issues in the field of HCC surveillance. 2. Most of the evident-based conclusions had been well-documented in the guidelines, such as APSAL and AASLD. Such surveillance has been doing in eastern Asia for several decades. The author may strengthen the new concept after this review. 3. One of the issues in identifying high risk group from HBsAg carriers may need further discussion. The author mentioned HBV DNA level as a risk factor in HCC development. HBV DNA assay is quite expensive that is not recommended in most of the HBsAg carriers. Practically, ALT level is cheap and always available in evaluation of liver status. The author may make a discussion about using ALT levels in selection of high risk HBsAg carriers.

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: 46747

Title: Hepatocellular carcinoma surveillance: An evidence-based approach

Reviewer's code: 00503849

Reviewer's country: Taiwan

Science editor: Ruo-Yu Ma

Date sent for review: 2019-02-22

Date reviewed: 2019-02-25

Review time: 8 Hours, 3 Days

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

The manuscript was well written. The contents of this manuscript can provide useful information to the readers. I recommend publishing this manuscript. Minor comments:

1. Introduction (page 3) correction alpha1-antitrypsin deficiency to alpha 1-antitrypsin deficiency alpha-feto-protein to alpha-fetoprotein
2. The abbreviation should be spelled



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in full in its first appearance in the main text. The descriptions in page 8 (hereditary hemochromatosis (HH), primary biliary cholangitis (PBC), autoimmune hepatitis (AIH) and alpha-1-antitrypsin deficiency (A1AT)) were not their first appearances in the main text. Abbreviation of PCP in page 13 should be spelled in full in its first appearance.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

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

BPG Search:

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- ☐ Plagiarism
- ☐ No