



PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

Manuscript NO: 47079

Title: Successful treatment of noncirrhotic portal hypertension with eculizumab in paroxysmal nocturnal hemoglobinuria

Reviewer’s code: 03024263

Reviewer’s country: Russia

Science editor: Li-Jun Cui

Reviewer accepted review: 2019-03-13 15:03

Reviewer performed review: 2019-03-13 17:19

Review time: 2 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	(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 type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input checked="" 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

With its extreme rarity, paroxysmal nocturnal hemoglobinuria (PNH) can be risk factor for development of the extrahepatic portal venous thrombosis (PVT) in adults. In the available literature, I have not seen cases of idiopathic noncirrhotic portal hypertension



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(INCPH) (probably correctly - NCPF/IPH) caused by this disease. If so, the case described by the authors is unique. In this regard, strong evidence is needed that this is true. 1. Provide a description of small and medium branches of the portal vein for liver histology. 2. Most cases of NCPF/IPH present with enlarged spleen and gastrointestinal bleeding. What were the sizes of a spleen in the presented case. How can the absence of esophageal and gastric varices be explained? 3. Ascites is not rare in patients with IPH, but it occurs in association with PVT. However, ascites are rare in patients with NCPF and it is transient after a bleed. How can you explain its presence? 4. Has the hepatic venous pressure gradient been studied and what are the parameters of portal hemodynamics for the patient described in the presented case?

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

- The same title
- Duplicate publication
- Plagiarism
- No

BPG Search:

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PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

Manuscript NO: 47079

Title: Successful treatment of noncirrhotic portal hypertension with eculizumab in paroxysmal nocturnal hemoglobinuria

Reviewer's code: 02445854

Reviewer's country: Italy

Science editor: Li-Jun Cui

Reviewer accepted review: 2019-03-20 06:52

Reviewer performed review: 2019-03-20 09:13

Review time: 2 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 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 an interesting. There are some typing mistakes.

INITIAL REVIEW OF THE MANUSCRIPT



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PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

Manuscript NO: 47079

Title: Successful treatment of noncirrhotic portal hypertension with eculizumab in paroxysmal nocturnal hemoglobinuria

Reviewer's code: 00646357

Reviewer's country: Egypt

Science editor: Li-Jun Cui

Reviewer accepted review: 2019-03-21 05:25

Reviewer performed review: 2019-03-21 05:32

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 checked="" 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 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 checked="" type="checkbox"/> Minor revision	<input checked="" type="checkbox"/> Advanced
		<input 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

-Add more on the basic of this disease in the introduction -Discuss role of imaging using these ref Razek AA, Abdalla A, Omran E, Fathy A, Zalata K. Diagnosis and quantification of hepatic fibrosis in children with diffusion weighted MR imaging. Eur J



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Radiol 2011;78:129-34. Besheer T, Arafa M, El-Maksoud MA, et al. Diagnosis of cirrhosis in patients with chronic hepatitis C genotype 4: Role of ABCB11 genotype polymorphism and plasma bile acid levels. Turk J Gastroenterol 2018;29:299-307.

-Update of references as most of references are old

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PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

Manuscript NO: 47079

Title: Successful treatment of noncirrhotic portal hypertension with eculizumab in paroxysmal nocturnal hemoglobinuria

Reviewer’s code: 00071178

Reviewer’s country: Turkey

Science editor: Li-Jun Cui

Reviewer accepted review: 2019-03-20 15:48

Reviewer performed review: 2019-03-23 12:21

Review time: 2 Days and 20 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 type="checkbox"/> Grade B: Minor language	(High priority)	<input 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 checked="" 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 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

Dear Authors Thank you for good presentation 1-Some grammatical changes should be made in the English language of this case report. 2-The number of references is too much for a case presentation. The number of references should be reduced 3-Please



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check the last two paragraphs of the discussion again. You used a paragraph that started with " In conclusion ". Then you used a new sub-title "CONCLUSION". You should be correct this mistake.

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