

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 54183

Title: Portal hypertension in a case with biliary hamartomas: A case report

Reviewer's code: 03024263

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Professor

Reviewer's Country/Territory: Russia

Author's Country/Territory: China

Manuscript submission date: 2020-01-19

Reviewer chosen by: Ruo-Yu Ma

Reviewer accepted review: 2020-02-18 09:17

Reviewer performed review: 2020-02-19 17:25

Review time: 1 Day and 8 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 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

Multicystic biliary hamartoma (von Meyenburg complex) a rare liver lesion that has been described as a distinct entity from other previously classified hepatobiliary cystic lesions. Symptomatic cases are rare, and esophageal varices typically are not noted. I know of only 1 case identified in the English medical literature (S. Yoshida et al. DOI: 10.1111/j.1478-3231.2008.01903.x). In the case submitted for review, the authors described the classic imaging features of von Meyenburg complex detected by computed tomography, magnetic resonance imaging and magnetic resonance cholangiopancreatography. However, the lack of histological verification of the diagnosis significantly reduces its quality. Firstly, it is generally thought that the persistence of immature duct elements stimulates the formation of portal fibrous tissue. Therefore, if fibrosis by von Meyenburg complex occurs in all or extensive portal vein area it might contribute to portal hypertension. In addition, multicystic biliary hamartoma should be carefully differentiated from a variety of other neoplastic and non-neoplastic hepatobiliary cystic lesions.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

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

BPG Search:

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism



**Baishideng
Publishing
Group**

7041 Koll Center Parkway, Suite
160, Pleasanton, CA 94566, USA
Telephone: +1-925-399-1568
E-mail: bpgoffice@wjgnet.com
https://www.wjgnet.com

[Y] No

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 54183

Title: Portal hypertension in a case with biliary hamartomas: A case report

Reviewer's code: 00054993

Position: Editorial Board

Academic degree: MD

Professional title: Emeritus Professor, Professor

Reviewer's Country/Territory: Austria

Author's Country/Territory: China

Manuscript submission date: 2020-01-19

Reviewer chosen by: Ruo-Yu Ma

Reviewer accepted review: 2020-02-18 09:00

Reviewer performed review: 2020-02-23 12:15

Review time: 5 Days and 3 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 checked="" type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input checked="" 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 checked="" 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

Report of a 40 years old patient presenting with signs of portal hypertension, gastroesophageal vatical bleeding and multiple irregular, round lesions in the liver. Although not definitely proven, the authors present their observations as a rare case of complicated biliary hamartoma, type Von Meyenburg complexes. Points of critique: The diagnosis is incomplete, no liver biopsy was made, thus neither the lesions nor the "regular" liver tissue was investigated histologically. Therefore the case report in its core message is only speculative. The CASE SUMMARY describes the case presenting with hematochezia. Hematochezia means fresh, red, bloody stools, which is not typical for gastroesophageal bleeding sources. Maybe the authors use melena and hematochezia synonymously, which is not correct. The CASE PRESENTATION describes twice observations of September 20, 2018 but it is not clear, whether the second gastroscopy was a follow-up after the initial intervention on the same day. If so, the time interval and indication should be given. More disturbing is the wording "Thus, our endoscopist did not undergo endoscopic variceal therapy. Meant is probably that the endoscopist did not perform an endoscopic therapy on the patient (and not on himself). The DISCUSSION explains why the liver could not be biopsied, but the reference list is not up to date. The most recent reference dates from 2015, although several papers have been published on this topic more recently, for instance "Magnetic resonance imaging of fibropolycystic liver disease: the spectrum of ductal plate malformations. *Abdom Radiol (NY)*, 2019 Jun; 44(6):2156-2171."

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism



**Baishideng
Publishing
Group**

7041 Koll Center Parkway, Suite
160, Pleasanton, CA 94566, USA
Telephone: +1-925-399-1568
E-mail: bpgoffice@wjgnet.com
https://www.wjgnet.com

[Y] No

BPG Search:

[] The same title

[] Duplicate publication

[] Plagiarism

[Y] No