



PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

Manuscript NO: 59637

Title: Living-donor liver transplantation in Budd-Chiari syndrome with inferior vena cava complete thrombosis. A Case Report and Review of the Literature.

Reviewer’s code: 02662861

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Professor

Reviewer’s Country/Territory: South Korea

Author’s Country/Territory: Brazil

Manuscript submission date: 2020-09-23

Reviewer chosen by: AI Technique

Reviewer accepted review: 2020-09-24 11:59

Reviewer performed review: 2020-09-26 09:40

Review time: 1 Day and 21 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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SPECIFIC COMMENTS TO AUTHORS

MAJOR STRENGTHS 1. The text is relatively well-organized with logical formatting, and it is of appropriate length. 2. Only approximately 70 patients with BCS underwent LDLT worldwide between 1989 and 2015. Authors have reported a case of a complex retrohepatic IVC thrombosis due to BCS in a patient with HCC beyond the Milan criteria.

MAJOR WEAKNESSES 3. In laboratory examination, readers may not be accustomed to the normal values of the each laboratory data. It would be better to add the normal reference data. 4. In discussion, VCI --> IVC.



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Reviewer's code: 00071178

Position: Editor-in-Chief

Academic degree: FACS, MD

Professional title: Associate Professor

Reviewer's Country/Territory: Turkey

Author's Country/Territory: Brazil

Manuscript submission date: 2020-09-23

Reviewer chosen by: AI Technique

Reviewer accepted review: 2020-09-25 22:09

Reviewer performed review: 2020-10-01 06:28

Review time: 5 Days and 8 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
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Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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SPECIFIC COMMENTS TO AUTHORS

Dear Author. Thank you for presentation of this case. I read the article carefully. I have a few criticisms and suggestions about the management of this patient. 1- Why was the TACE protocol applied although tumor diameter and AFP levels were within acceptable limits? 2-AFP, dynamic liver CT and MR images are mostly sufficient for the diagnosis of HCC. Why was a diagnostic percutaneous biopsy performed for this patient? 3-Why was venovenous bypass performed in a patient with well developed collateral circulation? My suggestions: An important study was published in 2020 on the replacement of the retrohepatic vena cava inferior in LDLT. I suggest that this study be included in Table-1 (Usability of Inferior Vena Cava Interposition Graft During Living Donor Liver Transplantation: Is This Approach Always Necessary? J Gastrointest Surg. 2020;24(7):1540-1551. doi: 10.1007/s11605-019-04342-6) Replacement of retrohepatic vena cava is not always necessary in patients with good collateral circulation. In this regard, I suggest you use the following article (Usability of Inferior Vena Cava Interposition Graft During Living Donor Liver Transplantation: Is This Approach Always Necessary? J Gastrointest Surg. 2020;24(7):1540-1551. doi: 10.1007/s11605-019-04342-6) Which vascular graft materials should be use for the retroheaptic vena cava reconstruction ? (Storage of allogeneic vascular grafts: experience from a high-volume liver transplant institute. Int Surg. 2013;98(2):170-4. doi: 10.9738/INTSURG-D-12-00035.1.)



RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Reviewer's code: 00071178

Position: Editor-in-Chief

Academic degree: FACS, MD

Professional title: Associate Professor

Reviewer's Country/Territory: Turkey

Author's Country/Territory: Brazil

Manuscript submission date: 2020-09-23

Reviewer chosen by: Jia-Ru Fan

Reviewer accepted review: 2020-11-14 16:43

Reviewer performed review: 2020-11-14 16:47

Review time: 1 Hour

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS



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Thank you for this case presentation. Necessary revisions have been made in the manuscript.