

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 61348

Title: T-tube versus No T-tube in adult orthotopic liver transplantation for biliary tract reconstruction: An updated systematic review and meta-analysis

Reviewer's code: 03668558

Position: Editorial Board

Academic degree: MD

Professional title: Consultant Physician-Scientist, Doctor

Reviewer's Country/Territory: Italy

Author's Country/Territory: China

Manuscript submission date: 2020-12-03

Reviewer chosen by: Le Zhang

Reviewer accepted review: 2020-12-08 07:49

Reviewer performed review: 2020-12-11 18:54

Review time: 3 Days and 11 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 Grade E: Do not publish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 type="checkbox"/> Grade B: Minor language polishing <input checked="" type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input 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

SPECIFIC COMMENTS TO AUTHORS

This systematic review and metanalysis aimed at evaluating the safety and effectiveness of T-tube placement after biliary reconstruction in the liver transplant setting. The Authors systematically reviewed the literature on the field, including 18 papers between 1995 and 2020. Furthermore, the studies were divided according to publication year (period 1: 1995-2010; period 2: 2011-2020). Metanalysis showed that no significant difference in terms of overall biliary complications or cholangitis were observed between groups in period 1, whereas T-tube placement seemed to be associated with biliary complication in studies performed between 2011-2020. Major comments: - The study included only patients transplanted over 18 years of age. Therefore, this metanalysis refers only to adult LT. This should be added in the title of the manuscript. - Biliary strictures can be diagnosed also with MRI or CT scan, in patients without T-Tube - According to the Jadad score, the quality of studies, and their retrospective design, should be cited in the Discussion section, as potential pitfalls. - The diagnostic role of ERC has been largely reduced by the use of MRI. - The Authors said that all studies were retrospective. However, the study by Lopez-Andujar was not a RCT, but a prospective, single center, study, which aimed at evaluating results of a previous RCT performed by the same Authors. - The second paragraph of the discussion section, where the Authors dealt with hypothetic role of T-tube on biliary strictures, is quite difficult to understand. I suggest to revise this section. - Given the heterogeneity among studies and across results provided by this metanalysis, I suggest to modify the conclusion section in the Abstract body. Indeed, in my opinion, results are not strong enough to suggest against the use of T tube. Minor comments: - English language polishing is needed. There are some typos throughout the manuscript (e.g., trail instead of trial; charcot instead of Charcot, systemic instead of systematic, did not reduce instead

of did not reduced, “lost the significant”)

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Name of journal: World Journal of Gastroenterology

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Title: T-tube versus No T-tube in adult orthotopic liver transplantation for biliary tract reconstruction: An updated systematic review and meta-analysis

Reviewer's code: 03011389

Position: Editorial Board

Academic degree: FAASLD, MD, PhD

Professional title: Assistant Professor, Chief Doctor

Reviewer's Country/Territory: Peru

Author's Country/Territory: China

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Reviewer chosen by: Le Zhang

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Reviewer performed review: 2020-12-15 04:29

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Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input 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 checked="" type="checkbox"/> Yes <input 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

SPECIFIC COMMENTS TO AUTHORS

This is an updated systematic review and meta-analysis of a surgical approach in liver transplantation to intent to solve a challenge question.

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

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Title: T-tube versus No T-tube in adult orthotopic liver transplantation for biliary tract reconstruction: An updated systematic review and meta-analysis

Reviewer's code: 00182423

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Professor, Surgeon

Reviewer's Country/Territory: South Korea

Author's Country/Territory: China

Manuscript submission date: 2020-12-03

Reviewer chosen by: Le Zhang

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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 type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input 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

1. It was very nice to read this well-designed and well-performed meta-analysis. 2. That using a T-tube increases the incidence of overall biliary complications, bile leaks and cholangitis significantly but did not reduce the incidence of postoperative biliary strictures since 2010 was an interesting and appealing conclusion of this study. 3. However the interpretations of the findings were not adequate or appropriate in the 'discussion'. So I attached memos at some points in the manuscript. Please revise your interpretations so that readers can agree with you.

RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Professional title: Consultant Physician-Scientist, Doctor

Reviewer's Country/Territory: Italy

Author's Country/Territory: China

Manuscript submission date: 2020-12-03

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Reviewer performed review: 2021-01-02 11:30

Review time: 18 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
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SPECIFIC COMMENTS TO AUTHORS



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I would like to thank for the opportunity to read the revised version of this manuscript.

The Authors partly answered my previous comments. In detail: - there are still several typos, e.g., trail instead of trial; there are still redundant and very long sentences in the discussion section. Please carefully review the text before publication. - the manuscript Ref#26, PMID 30736977, is a prospective comparative study, which validated the results of a previous RCT performed by the same group (Ref#21, PMID 23426348). Therefore, I suppose there is still a mistake in table 1, where this study has been defined as RCT, as well as in related Figures. Moreover, the sentence dealing with the retrospective design of all comparative studies should be modified before publishing the paper. Since this manuscript has the potential to be highly cited, due its nature and the interesting topic in the setting of liver transplantation, I encourage the Authors to carefully check this point because methodology represents a strength of a metanalysis. -the Authors said that a minimum follow-up time for at least 3 months was an inclusion criterion, but they said that one study followed-up patients for 2 months. Please correct this sentence before publication. - I appreciate the revised conclusions in the abstract body. However, if we consider the relevant results of this metanalysis, it seemed that using T-tube was beneficial on biliary stricture before 2010, whereas no benefit was observed for overall biliary complication, biliary leak and cholangitis in the same period. Considering the studies after 2010, not using T tube was beneficial in terms of bile leakage and cholangitis, whereas (after sensitivity analysis), it was not associated with overall biliary complications and biliary strictures. Therefore, if we consider the conclusion of this metanalysis, we have to say that “studies published in the last decade did not provide enough evidence to support the routine use of T-tube in adults during OLT”. Otherwise, a pooled analysis on ALL studies should be performed. - I would see data on heterogeneity in the result section in the abstract body.

RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Reviewer's code: 00182423

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Professor, Surgeon

Reviewer's Country/Territory: South Korea

Author's Country/Territory: China

Manuscript submission date: 2020-12-03

Reviewer chosen by: Jia-Ru Fan

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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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SPECIFIC COMMENTS TO AUTHORS



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