

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 62480

Title: Prediction of microvascular invasion in solitary hepatocellular carcinoma ≤ 5 cm based on computed tomography radiomics

Reviewer's code: 05450263

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: China

Manuscript submission date: 2021-01-18

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-01-18 13:58

Reviewer performed review: 2021-01-23 11:33

Review time: 4 Days 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 Grade E: Do not publish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 type="checkbox"/> Accept (General priority) <input checked="" 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No



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SPECIFIC COMMENTS TO AUTHORS

no

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 62480

Title: Prediction of microvascular invasion in solitary hepatocellular carcinoma ≤ 5 cm based on computed tomography radiomics

Reviewer's code: 00070509

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Professor

Reviewer's Country/Territory: South Korea

Author's Country/Territory: China

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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 Grade E: Do not publish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 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

SPECIFIC COMMENTS TO AUTHORS

1. The authors described the inclusion and exclusion criteria. The collected patients were selected consecutively? According to the Table 1, the tumor sizes were 36(28:44), 34(27.5:41) in each group. Is there anyone less than those sizes in this period? MVI is more frequent present and more easily detected in radiomics in bigger tumor. So, the details of the tumor size should be included 2. Inclusion criteria: (1) ; (2) tumor with the maximum diameter of <5 cm. ----> 'less than 5 cm', 'solitary HCC ≤5 cm' should be unified. 3. The authors described the limitations of this study - retrospective and single-center study, study only used arterial phase images. However, this study raise the value of the radiomics model in HCC very much.

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 62480

Title: Prediction of microvascular invasion in solitary hepatocellular carcinoma ≤ 5 cm based on computed tomography radiomics

Reviewer's code: 02526266

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: China

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

SPECIFIC COMMENTS TO AUTHORS

By retrospective analysis and validation control, the study showed that CT radiomics has a certain predictive value in MVI in solitary HCC ≤ 5 cm, compared to imaging features (TTPVI and RVI). It is significance for surgery choice in patients with HCC. But I think that there is not enough for only two radiologic features (Reference: Radiomic analysis of contrast-enhanced CT predicts microvascular invasion and outcome in hepatocellular carcinoma) .

1 Why focused on the solitary hepatocellular carcinoma ≤ 5 ? In the section of introduction, the sentence "At present, few studies have focused on the prediction of MVI in the early stage of HCC (which refers to solitary and a tumor size of ≤ 5 cm, without MVI).", which has no evidence (including reference) to support. Please give references or other evidence.

2 In the section of "Examination methods", "The images at the arterial phase, portal phase, or delayed phase were obtained at 30, 60 and 120 seconds after the injection of the contrast agent", the delayed time for three phases is optimal?

3 The title of Fig4 doesn't make sense.

4 Tn the third paragraph of discussion, what is the "The Norman model ? " or spelling mistake?