

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 64265

Title: Systematic review and meta-analysis of trans-jugular intrahepatic portosystemic shunt for cirrhotic patients with portal vein thrombosis

Reviewer's code: 03024263

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Professor

Reviewer's Country/Territory: Russia

Author's Country/Territory: China

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Reviewer chosen by: AI Technique

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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 Grade E: Do not publish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 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

The authors presented a systematic review of existing published data of TIPS for cirrhotic patients with portal vein thrombosis (PVT). Indeed, with the advent of multiple imaging techniques for real-time visualization of the portal vein during TIPS, PVT is no longer considered as an absolute contraindication to TIPS placement. However, there are not enough publications that comprehensively evaluate this approach. It is a well-planned systematic review and meta-analysis based on current clinical data. A comprehensive search was conducted in the relevant databases. Other important sources of information were also examined. Their sterling statistical processing was carried out. The authors showed that TIPS can be effectively utilized for for cirrhotic patients with PVT, but cavernous transformation is an indicator for technical failure. This is a very interesting and important data, but require further evidence. A significant limitation of this study is the use of papers for evaluation, which are mostly retrospective designs with a small number of patients.