

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 67212

Title: Recurrent pyogenic liver abscess after pancreatoduodenectomy caused by

common hepatic artery injury in atypical celiac axis anatomy

Reviewer's code: 00058381 Position: Editorial Board Academic degree: MD

Professional title: Professor

Reviewer's Country/Territory: Austria

Author's Country/Territory: China

Manuscript submission date: 2021-04-18

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-04-25 11:55

Reviewer performed review: 2021-04-25 16:08

Review time: 4 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [] Grade C: Good [Y] Grade D: Fair [] Grade E: Do not publish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



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SPECIFIC COMMENTS TO AUTHORS

Main comments: (1) Anatomic variations are well-known pitfalls in pancreatic surgery. An evaluation of the anatomic conditions by preoperative imaging is standard. (2) From the text and from the figures it is not entirely clear, what kind of injury was inflicted on the CHA. (3) Figure legend 2 should describe the blood supply to the liver in this patient in more detail. Further comments: (4) Abstract/Case Summary, third sentence: "percutaneous transhepaticcholangial drainage" -> ...transhepatic cholangial... (5) Physical examination: "his heart was 121 bpm, his respiratory was 24 breaths/min" -> heart rate, respiratory rate. (6) Conclusion, first sentence (and Abstract/Case Summary, last sentence): "In this case, the preoperative computed tomography scan and examination of anatomical variations played a pivotal role in avoiding arterial injuries" did you mean "examination of anatomical variations would have played a pivotal role"? (7) Figure 2: Along with the other abbreviations, "LIPA" should also be explained in the caption (left inferior phrenic artery). (8) Inspite of editing, there are linguistic and stylistic problems, notably in the abstract (e.g., "He have undergone PD", "postoperative liver abscess have recurred"), but also within the rest of the text (e.g., "the patient reappeared the fever", "A physical examination of the abdomen revealed that patient's right abdominal muscle was tension with persistent tenderness", "the morality rate of hepatic abscess have reduced to 5%-30%"). Perhaps changes were made after the editing process or the authors did not take up all the suggestions. (9) Informed consent statement: "Informed written consent wasobtained from the patient" -> ...was obtained... (10) Reference 15: Within the discussion, this reference is cited as "Edoardo et al."; it should be Virgilio et al. (consistent with the reference list; Edoardo is the author's first name).



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Name of journal: World Journal of Clinical Cases

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Title: Recurrent pyogenic liver abscess after pancreatoduodenectomy caused by

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Reviewer's code: 02845080 Position: Peer Reviewer

Academic degree: DNB, FICS, FRCS (Gen Surg), MBBS, MNAMS, MS

Professional title: Associate Professor, Director, Surgical Oncologist

Reviewer's Country/Territory: Singapore

Author's Country/Territory: China

Manuscript submission date: 2021-04-18

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-04-27 03:35

Reviewer performed review: 2021-04-27 03:51

Review time: 1 Hour

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



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SPECIFIC COMMENTS TO AUTHORS

1. Remove figure 4 histology image as has no bearing in the report 2. Did authors rule out technical issues with HJ i.e. stricture etc as a cause of liver abscess. Did you rule out diverticular disease? 3. What was the bacteriology and was patient treated by drainage procedure for abscess - all the time? i.e did you resort to surgery due to inadequate medical/non-operative management? 4. Thanks



PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 67212

Title: Recurrent pyogenic liver abscess after pancreatoduodenectomy caused by

common hepatic artery injury in atypical celiac axis anatomy

Reviewer's code: 02539765 Position: Peer Reviewer Academic degree: MD

Professional title: Associate Professor

Reviewer's Country/Territory: India

Author's Country/Territory: China

Manuscript submission date: 2021-04-18

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-04-26 09:57

Reviewer performed review: 2021-05-04 14:25

Review time: 8 Days and 4 Hours

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



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SPECIFIC COMMENTS TO AUTHORS

This is an interesting case report. This patient developed recurrent intrahepatic abscesses, likely cholanagitic abscesses, following PD. This is rare presentation and quality of write-up is good. However, I'm not sure whether this complication can be directly linked to the abnormal celiac anatomy and vascular injury described in this article. Is it possible that it's caused by recurrent ascending cholangitis? Authors can shed more light on these issues and include relevant references. Authors may provide an MR cholangiogram picture to get a better understanding of the patient's ductal anatomy. Please also provide a pus culture and antibiotic sensitivity result of the abscess. The case presentation may be written more succinctly. Multiple headings seem to be unnecessary. Investigations may be provided in a table and only important findings should be mentioned in the text. Finally, some grammar and language policing is needed.



RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Title: Recurrent pyogenic liver abscess after pancreatoduodenectomy caused by

common hepatic artery injury in atypical celiac axis anatomy

Reviewer's code: 00058381

Position: Editorial Board

Academic degree: MD

Professional title: Professor

Reviewer's Country/Territory: Austria

Author's Country/Territory: China

Manuscript submission date: 2021-04-18

Reviewer chosen by: Man Liu

Reviewer accepted review: 2021-07-29 10:00

Reviewer performed review: 2021-07-29 12:19

Review time: 2 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [] Grade C: Good [Y] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [Y] Minor revision [] Major revision [] Rejection
Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No
statements	Commercial pres [1] No



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(1) In the abstract, the authors write: "Here, we present a case that recurrent pyogenic liver abscess after PD is caused by right hepatic artery injury in atypical celiac axis anatomy"; however, in their reply to the reviewer and in the text of the manuscript they describe an injury of the common hepatic artery. This is confusing for the reader. Additional comments: (2) Laboratory examinations, last sentence: "Imlpenem" -> Imipenem. (3) Imaging examinations (last sentence) and figure legend 3: "picure" -> picture. (4) Discussion, last sentence: "PTCD was performed to drainage pus and bile" -> PTCD was performed to drain pus and bile. (5) Figure legend 2: "the CHA originated from the SMA" -> the CHA originated from the SMA.