



## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Clinical Cases*

**Manuscript NO:** 70076

**Title:** Pediatric living donor liver transplantation using liver allograft after ex vivo backtable resection of hemangioma

**Provenance and peer review:** Unsolicited manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 03488266

**Position:** Peer Reviewer

**Academic degree:** MD, PhD

**Professional title:** Professor

**Reviewer's Country/Territory:** South Korea

**Author's Country/Territory:** China

**Manuscript submission date:** 2021-07-23

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-08-01 08:03

**Reviewer performed review:** 2021-08-03 12:58

**Review time:** 2 Days and 4 Hours

<b>Scientific quality</b>	<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 Grade E: Do not publish
<b>Language quality</b>	<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
<b>Conclusion</b>	<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
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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<b>Peer-reviewer statements</b>	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**

Authors presented a living related liver transplantation case with donor liver hemangioma. They resected single large hemangioma (9.0\*5.8 cm) at S4 in donor liver ex vivo. They transplanted donor liver S2 and S3 into 8 month old female patient with congenital biliary atresia. Ex vivo resection of hemangioma was successful. GV/SLV, GRWR were sufficient for supporting the recipient's liver function. This case report gives us two learning points. First, backtable resection of hemangioma is possible even in living related donor liver. Second, left lobe of adult liver with some benign pathology can be donated to pediatric patient if the remaining liver volume is enough to support metabolic requirement. This paper can widen the eligibility criteria for liver transplantation.