

PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 70853

Title: High tumor mutation burden indicates a poor prognosis in patients with intrahepatic cholangiocarcinoma

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03475280

Position: Peer Reviewer

Academic degree: MD

Professional title: Attending Doctor

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2021-08-17

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-09-01 00:11

Reviewer performed review: 2021-09-10 00:23

Review time: 9 Days

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 Grade E: Do not publish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 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
Conclusion	<input checked="" type="checkbox"/> Accept (High priority) <input 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="radio"/>] Anonymous [<input type="radio"/>] Onymous Conflicts-of-Interest: [<input type="radio"/>] Yes [<input checked="" type="radio"/>] No
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SPECIFIC COMMENTS TO AUTHORS

It's not hard to imagine that tumor mutation burden is associated with prognosis of patients with ICC. Authors analyzed the utility of TMB in prognosis. And TMB threshold values were calculated using the 1-, 3-, and 5year ROC curveanalysis with the corresponding maximum Youdenn index. Authors revealed that TMB was identified as an independent risk predictor for ICC patients. I think the results of reserch are original and wonderful. However, the patients includes various kinds of ICC, such as mass-forming type, hilar type ICC and so on. In the future, the authors should investigate the impact of TMB on the prognosis following several kinds of ICC.

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Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05322119

Position: Peer Reviewer

Academic degree: FACS, MD

Professional title: Surgical Oncologist

Reviewer's Country/Territory: Peru

Author's Country/Territory: China

Manuscript submission date: 2021-08-17

Reviewer chosen by: AI Technique

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Reviewer performed review: 2021-09-27 02:36

Review time: 9 Days and 11 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
Language quality	<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
Conclusion	<input checked="" type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
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Peer-reviewer statements	Peer-Review: [<input checked="" type="radio"/>] Anonymous [<input type="radio"/>] Onymous Conflicts-of-Interest: [<input type="radio"/>] Yes [<input checked="" type="radio"/>] No
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SPECIFIC COMMENTS TO AUTHORS

Thank you for the opportunity to review this excellent manuscript. I would like to propose some questions and suggestions with aims to improve the manuscript: 1. I would suggest to change the Introductions section into Background as recommended by the journal. 2. The authors have claimed in the Background section that no previous study has addressed the impact of TMB in ICC, however in the discussion section they cite Zhang et al. Please explain the reason for this. 3. How were the training and test groups divided? If so please explain this in the methods section. 4. In the discussion I believe the authors tried to mention the RAS gene instead of RARS. However, if I am wrong please explain what this acronym stands for.