

## PEER-REVIEW REPORT

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

**Manuscript NO:** 71670

**Title:** Successful living donor liver transplantation of a graft - to - recipient weight ratio of 0.41 without portal flow modulation: a case report

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

**Peer-review model:** Single blind

**Reviewer's code:** 03990797

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Associate Professor

**Reviewer's Country/Territory:** Turkey

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

**Manuscript submission date:** 2021-09-17

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-09-17 06:21

**Reviewer performed review:** 2021-09-17 10:25

**Review time:** 4 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 Grade E: Do not publish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 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No



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<b>Peer-reviewer statements</b>	Peer-Review: [ <input type="checkbox"/> ] Anonymous [ <input checked="" type="checkbox"/> ] Onymous Conflicts-of-Interest: [ <input type="checkbox"/> ] Yes [ <input checked="" type="checkbox"/> ] No
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#### **SPECIFIC COMMENTS TO AUTHORS**

Very well written paper on an exciting success story. Two points should be elucidated:

1. Did the authors measure preoperative portal vein pressure of the recipient? If so, how high was the portal pressure? 2. How did the authors justify their decision of transplanting such a small graft and risk small for size syndrome rather than enlisting the patient for deceased donor waiting list? Well done for the impressive work.

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**Reviewer's code:** 02099384

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Associate Professor

**Reviewer's Country/Territory:** Japan

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

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**Reviewer accepted review:** 2021-10-08 02:11

**Reviewer performed review:** 2021-10-09 09:59

**Review time:** 1 Day and 7 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
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#### **SPECIFIC COMMENTS TO AUTHORS**

This is a case presentation who underwent living donor liver transplantation using a small graft graft-to-recipient weight ratio of 0.41%. 1. (P5, L13) The GRWR of the preoperative estimated one was 0.55, which has a discrepancy with the actual size. What is the reason of the difference? If the preoperative evaluated size of the graft was 0.41, is the LDLT indicated? 2. (P5, L17) It is described that all the main procedures were done by one surgeon. Is the donor liver harvesting and the whole liver resection of the recipient done by the same person? 3. (P6, L6) Is the portal modulation considered when the actual size was found to be 0.41?