

PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Oncology*

Manuscript NO: 74102

Title: Survival Characteristics of Fibrolamellar Hepatocellular Carcinoma: A SEER Database Study

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03755224

Position: Associate Editor

Academic degree: FACS, FRCS, MD, PhD

Professional title: Professor

Reviewer's Country/Territory: Spain

Author's Country/Territory: United States

Manuscript submission date: 2021-12-25

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-01-17 19:58

Reviewer performed review: 2022-01-27 09:32

Review time: 9 Days and 13 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 Grade E: Do not publish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 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 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

This is a very important series of patients with fibrolamellar hepatocarcinoma. The distribution of the series by age group clearly shows a higher survival rate in the group of young patients compared to the other groups. When looking at the tables, it can be seen that the older patients have a greater degree of oncological involvement. It is possible that the explanation for this is that the existence of hepatocarcinoma on normal liver tissue in young patients allows more aggressive interventions to be carried out, and therefore better survival rates. However, it is striking that there is no difference in survival in relation to the number of existing lymph nodes or metastases, when both are the most important criteria in oncology, including the chemotherapy regimen. I think that an important limitation of the study is the loss of a lot of information that may interfere with the interpretation of the final result. I think it would have been interesting to express the 5-year survival rate of each group, in order to be able to compare them with series such as Pinna. I would like to know if the young patients had a history of familial colic polyposis.

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Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05774393

Position: Peer Reviewer

Academic degree: MD

Professional title: Assistant Professor

Reviewer's Country/Territory: Egypt

Author's Country/Territory: United States

Manuscript submission date: 2021-12-25

Reviewer chosen by: Xin Liu (Online Science Editor)

Reviewer accepted review: 2022-02-25 19:51

Reviewer performed review: 2022-02-26 08:43

Review time: 12 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" 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



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**Peer-reviewer
statements**

Peer-Review: [☒] Anonymous [☐] Onymous

Conflicts-of-Interest: [☐] Yes [☒] No

SPECIFIC COMMENTS TO AUTHORS

Why did you see the effect of tumor grade, tumor budding on the survival as they affect the response to therapy The lymph node and metastasis are known prognostic factors which affect the survival Why tumor present at advanced stage at early age Data about response to chomoradiotherapy is essential as this affects the recurrence rate and the survival rate

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Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 04135931

Position: Editorial Board

Academic degree: MD

Professional title: Professor

Reviewer's Country/Territory: Turkey

Author's Country/Territory: United States

Manuscript submission date: 2021-12-25

Reviewer chosen by: Xin Liu (Online Science Editor)

Reviewer accepted review: 2022-02-25 10:33

Reviewer performed review: 2022-03-01 00:16

Review time: 3 Days and 13 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 checked="" 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: [☒] Anonymous [☐] Onymous

Conflicts-of-Interest: [☐] Yes [☒] No

SPECIFIC COMMENTS TO AUTHORS

The most original finding of the manuscript is the better survival of those having surgery even lymph node positivity and younger patients diagnosed with fibrolamellar hepatocellular carcinoma, and although the strongest part is to have a quite a large number of patients for fibrolamellar hepatocellular carcinoma provided from the SEER database, it is also affected by the missing data entry of SEER database, which is the weakness of it. The publication encourages the surgeons to perform surgery because of unlike other hepatocellular carcinoma cases, patients with fibrolamellar hepatocellular carcinoma patients generally do not have any other underlying liver disease and are younger.

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Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05742869

Position: Peer Reviewer

Academic degree: PhD

Professional title: Research Scientist, Surgeon, Surgical Oncologist

Reviewer's Country/Territory: Kazakhstan

Author's Country/Territory: United States

Manuscript submission date: 2021-12-25

Reviewer chosen by: Xin Liu (Online Science Editor)

Reviewer accepted review: 2022-02-28 05:47

Reviewer performed review: 2022-03-04 06:31

Review time: 4 Days

Scientific quality	<input checked="" type="checkbox"/> Grade A: Excellent <input 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
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Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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**Peer-reviewer
statements**

Peer-Review: ☒ Anonymous ☐ Onymous

Conflicts-of-Interest: ☐ Yes ☒ No

SPECIFIC COMMENTS TO AUTHORS

no comments

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Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03815231

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Chief Physician, Professor

Reviewer's Country/Territory: China

Author's Country/Territory: United States

Manuscript submission date: 2021-12-25

Reviewer chosen by: Xin Liu (Online Science Editor)

Reviewer accepted review: 2022-02-25 03:06

Reviewer performed review: 2022-03-05 04:07

Review time: 8 Days and 1 Hour

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
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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**Peer-reviewer
statements**Peer-Review: [☒] Anonymous [☐] OnymousConflicts-of-Interest: [☐] Yes [☒] No**SPECIFIC COMMENTS TO AUTHORS**

This retrospective study based on the SEER database suggests a better survival of younger patients with FL-HCC. This trend may be because they received more surgical interventions. There were no racial differences in survival for FL-HCC, which is seen in HCC. The patient who had wedge or segmental resection or lobectomy had better survival. Although the present study and its findings were similar to the previously studies, the number of cases in this study was more than that in previous studies, and the data were relatively comprehensive and informative. In addition to tables, it is better to use colored pie charts, bar charts, line charts, etc. to make the results easier to read and understand.

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Peer-review model: Single blind

Reviewer's code: 03674268

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Chief Doctor, Professor

Reviewer's Country/Territory: China

Author's Country/Territory: United States

Manuscript submission date: 2021-12-25

Reviewer chosen by: Xin Liu (Online Science Editor)

Reviewer accepted review: 2022-02-25 09:49

Reviewer performed review: 2022-03-06 11:51

Review time: 9 Days and 2 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

**Peer-reviewer
statements**

Peer-Review: [☒] Anonymous [☐] Onymous

Conflicts-of-Interest: [☐] Yes [☒] No

SPECIFIC COMMENTS TO AUTHORS

The authors performed a retrospective study of Fibrolamellar hepatocellular carcinoma (FL-HCC) based on the SEER database. FL-HCC is a rare and distinct type of HCC, with limited understanding of factors that impact outcomes. This study revealed clinical characteristics and the survival data of FL-HCC by age, race, and surgical intervention. Due to the nature of the SEER database, this study has its limitations, such as lacking in laboratory data or underlying liver diseases. In general, the manuscript was well-constructed and relatively integrated. The topic was interesting and had clinical value. I have some suggestions to further improve the manuscript. 1. In this manuscript, the overall survival was analyzed by age, race, surgery types and metastasis status. Overall survival based on stages of FL-HCC should be analyzed as well. 2. Surgery was the main treatment modality of FL-HCC. It is also suggested that treatments other than surgery, such as intervention therapy or systemic therapy, should be introduced or analyzed. 3. Prognosis of FL-HCC was better than HCC. Second operation was recommended for local recurrence, and these patients also had decent prognosis. Therefore, recurrence data and second operation should also be analyzed.