# Format for ANSWERING REVIEWERS

June 20, 2022

Dear Editors,



On behalf of all the authors, I would like to thank you for your consideration of this paper. In the revised manuscript you will find the changes that we made in response to the Reviewers. In this response to reviewer letter we also indicated how we have dealt with the Reviewers' comments.

Please find enclosed the edited manuscript in Word format.

Name of Journal: World Journal of Hepatology Manuscript NO: 75150

Manuscript Type: ORIGINAL ARTICLE

Retrospective Study Multiparametric liver MRI evaluation of HCC treated by SBRT

Alessandro Serafini, Valeria Ruggeri, Riccardo Inchingolo, Marco Gatti, Alessia Guarneri, Cesare Maino, Davide Ippolito, Luigi Grazioli, Umberto Ricardi, Riccardo Faletti Invited Manuscript: 03358964

The manuscript has been improved according to the suggestions of reviewer and

## Reviewer #1:

1 Title. Reflects the content of the study.

2 Abstract. Abstract summarizes the content and goal of the treatment

3 Key words. eywords reflect the content of the treatment

<u>Authors' reply:</u> Thank you for the consideration of this paper and for your comment.

4 Background. Introduction section is well-well written. There are many spelling errors and revision of the

english language is very important

A: grammatical and lexical corrections have been made, hoping for the best we thank you for your suggestion.

5 Methods. The methods section is poorly organized. Subsections are required. Since some of the patients recieved a bridge to liver transplantation, it would be very good for authors to porvide the explant pathological analysis of the six patients that were transplanted

A: the category materials and methods has been modified and reorganised and additional subsections have been created. With regard to the 6 patients undergoing OLT, thanking the reviewer for the suggestion, we're not reporting isthopathology of our patient compared other 43 patients but in all patient results fibrosis and whitout evidence of infield or outfield recurrence

6 Results. The results are well written. The most striking data is the need for observing for 6 months before observing any effects of SBRT which also valid for TARE as well.

7 Discussion. Well well aritten and the references are up to date

8 Illustrations and tables. well presented

9 Biostatistics. Biostatistical analysis certificate is presented

10 Units. All units are presented in SI units.

11 References. Refrences are up to date

12 Quality of manuscript organization and presentation. Generally the quality of the mansucript is poor due to language and organizational problems.

A: thank you for your suggestion, a new revision from a native speaker English has been done.

13 Research methods and reporting. Not applicable because retrospective design

14 Ethics statements. is provided

Reviewer #2: The study results show that the efficacy of SBRT should be evaluated not in the first 6 months, but at least 9 months post-SBRT, when infield progression persists at very low rates while the risk of outfield progression increases significantly.

There are the following problems that need to be corrected.

1. Many single sentences are a natural paragraph, and the writing format is not standardized.

A: thank you for your comment; the text has been made more fluent and standardised.

2. Some points in the background section lack citations.

A: we considered it unnecessary to increase the number of bibliographical citations in the introduction

section as we believe that about 50% of the references are already present in the paragraph.

#### 3. Table 1 is not necessary.

- A: Table 1 has been removed
- 4. Table 2 does not use a three-wire table.
- pt.4: This change has been done.
- 5. There are too many pictures and need to be merged.

pt.5: we merged image 12 with image 16 and images 13, 14 and 15.

## 6. The references are too old, and it is recommended to mainly cite the literature published in the past 5 years.

A: we updated the literature used for the citations with more recent studies with almost overlapping conclusions. Only one literature citation dated 1980 has been retained as the study represents a milestone in the development of venocclusive disease.

# 2 Editorial Office's comments

Science Editor: The manuscript needs a great deal of language editing. In addition, Tables and Figures were not cited in the main text. The quality of the manuscript is very low.
Language Quality: Grade C (A great deal of language polishing)
Scientific Quality: Grade C (Good)

<u>Authors' reply:</u> A: Thank you for the consideration of this paper and for your comment. The requested changes have been one

2) Company Editor-in-Chief: I recommend the manuscript to be published in the World Journal of Hepatology. Before final acceptance, when revising the manuscript, the author must supplement and improve the highlights of the latest cutting-edge research results, thereby further improving the content of the manuscript. To this end, authors are advised to apply a new tool, the Reference Citation Analysis (RCA). RCA is an artificial intelligence technology-based open multidisciplinary citation analysis database. In it, upon obtaining search results from the keywords entered by the author, "Impact Index Per Article" under "Ranked by" should be selected to find the latest highlight articles, which can then be used to further improve an article under preparation/peer-review/revision. Please visit our RCA database for more information at: https://www.referencecitationanalysis.com/.

<u>Authors' reply:</u> A: Thank you for the consideration of this paper and for your comment. The Corresponding author is already in RCA (**RCA ID:** 00000451)

Finally, we wish to thank the Editors and the Reviewer for their comments that helped us to increase

the value of our paper.

Thank you again for publishing our manuscript in the World Journal of Hepatology.

Sincerely yours,

Riccardo Inchingolo, MD, EBIR, CIRSE Fellow

Interventional Radiology Unit,

"F. Miulli" Regional General Hospital,

Acquaviva delle Fonti (BA), 70021, Italy

riccardoin@hotmail.it

Tel: +39-333-4601735

Fax: +39-0835-253857