

## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Gastroenterology*

**Manuscript NO:** 75697

**Title:** Influence of different portal vein branches on hepatic encephalopathy during transjugular intrahepatic portosystemic shunt

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

**Peer-review model:** Single blind

**Reviewer's code:** 02831684

**Position:** Peer Reviewer

**Academic degree:** BM BCh, MD, PhD

**Professional title:** Chief Doctor, Doctor, Professor, Research Scientist

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

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

**Manuscript submission date:** 2022-02-11

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-02-12 04:03

**Reviewer performed review:** 2022-02-12 05:00

**Review time:** 1 Hour

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 Grade E: Do not publish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



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

I have carefully read the authors' letter on the role of Yao X et al. Letter to the Editor 'Puncturing the left branch of the portal vein to reduce HE during TIPS' and it seems to me that it has timely reasoning based on current knowledge and evidence. This opinion is supported by my own experience in collaboration with Dr. Lopera (Joseph AS, Sandhu B, Khalil A, Lopera J. Transjugular Portosystemic Shunt Reductions: A Retrospective Single-Center Experience. J Vasc Interv Radiol. 2019 Jun;30(6):876-884.) In conclusion, in my knowledge with right and left TIPS, more or less encephalopathy has not been demonstrated. On the other hand, the letter is very well argued.

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**Reviewer's code:** 03294368

**Position:** Editorial Board

**Academic degree:** DSc, MD, PhD

**Professional title:** Dean, Professor

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

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

**Manuscript submission date:** 2022-02-11

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-02-14 17:40

**Reviewer performed review:** 2022-02-15 16:48

**Review time:** 23 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 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

<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

The submitted paper - Letter to the Editor “Targeted puncture of left branch of the intrahepatic portal vein in transjugular intrahepatic portosystemic shunt to reduce hepatic encephalopathy” which is dedicated to paper “Targeted puncture of left branch of intrahepatic portal vein in transjugular intrahepatic portosystemic shunt to reduce hepatic encephalopathy” (published in World Journal of Gastroenterology. 2019 Mar 7;25(9):1088) is undoubtedly an interesting remark. The authors are putting under doubt the position that the targeted puncture of the left branch of the intrahepatic portal vein in transjugular intrahepatic portosystemic shunt reduces the hepatic encephalopathy. This doubt they are arguing by the fact, that there are “no studies in China or foreign countries have proven the occurrence of left and right blood stratification after the accumulation of splenic vein and mesenteric blood flow in the main trunk of the portal vein in patients with cirrhotic portal hypertension”. But there are several papers that confirm the differentiated distribution of bloodstreams from the portal vein in the right and left halves of the liver of both humans and experimental animals (de Araujo EM, Torres US, Racy DJ, Torres LR, Chojniak R, D’Ippolito G. The “streamline phenomenon” of the portal vein flow and its influence on liver involvement by gastrointestinal diseases: current concepts and imaging-based review. Abdominal Radiology. 2020 Feb;45(2):403-15; Copher GH, Dick BM. Stream line phenomena in the portal vein and the selective distribution of portal blood in the liver. Archives of Surgery. 1928 Sep 1;17(3):408-19). Besides, the similar phenomenon has been shown in clinical material, including cases of cirrhosis (Gallix BP, Reinhold C, Dauzat M, Bret PM. Streamlined flow in the portal vein: demonstration with MR angiography. J Magn Reson Imaging



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2002;15:603-609; Shreiner DP, Barlai-Kovach M. Diagnosis of alcoholic cirrhosis with the right-to-left hepatic lobe ratio: concise communication. J Nucl Med 1981; 22:116-120; Garcia JE, Atkins F. A low right-to-left hepatic lobe ratio. Is streamlining of ethanol to the right lobe of the liver the cause? Clin Nucl Med 1985; 10:807-809). Because of this, the authors' remark is somewhat controversial. However, we must agree with the pathos that confirmation of the phenomenon of distribution of portal vein bloodstreams of the different genesis in different halves of the liver, as well as its clinical significance, requires additional evidence. In view of all the above, I would support the publication of the submitted paper, which would support increasing the discussion space and further refining the indications and techniques of TIPS. However, it would be good if the tone of the text was softened somewhat and also if it was revised by a native language wearer.

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**Peer-review model:** Single blind

**Reviewer's code:** 06255079

**Position:** Peer Reviewer

**Academic degree:** MSc

**Professional title:** Lecturer

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

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

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**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-02-14 12:11

**Reviewer performed review:** 2022-02-20 12:50

**Review time:** 6 Days

<b>Scientific quality</b>	[ <input checked="" type="radio"/> ] Grade A: Excellent [ <input type="radio"/> ] Grade B: Very good [ <input type="radio"/> ] Grade C: Good [ <input type="radio"/> ] Grade D: Fair [ <input type="radio"/> ] Grade E: Do not publish
<b>Language quality</b>	[ <input checked="" type="radio"/> ] Grade A: Priority publishing [ <input type="radio"/> ] Grade B: Minor language polishing [ <input type="radio"/> ] Grade C: A great deal of language polishing [ <input type="radio"/> ] Grade D: Rejection
<b>Conclusion</b>	[ <input checked="" type="radio"/> ] Accept (High priority) [ <input type="radio"/> ] Accept (General priority) [ <input type="radio"/> ] Minor revision [ <input type="radio"/> ] Major revision [ <input type="radio"/> ] Rejection
<b>Re-review</b>	[ <input checked="" type="radio"/> ] Yes [ <input type="radio"/> ] No



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#### **SPECIFIC COMMENTS TO AUTHORS**

Title and abstract cover the main aspect. The key words reflect the focus of the manuscript. The Introduction/background is adequately described, present status and significance of the letter to the editor. This Letter to the Editor discusses the findings of studies that increase the value of content. Relevant literatures are adequately and appropriately presented. Important key points are raised, and discussed accordingly. The discussion is accurate and relevant to clinical practice. References are cited appropriately with the latest, important and authoritative references. This letter to the editor is concisely and coherently organized and presented. Appropriate language and grammar is used. This letter to the editor is prepared according to the appropriate research methods and reporting and met the requirements of ethics. Well written 'letter to the editor'.