



PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 83243

Title: Non-target lung embolization during portal vein embolization due to an unrecognized portosystemic venous fistula: A case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03816788

Position: Editorial Board

Academic degree: FACS, FICS, FRCS, MBBS, MS

Professional title: Professor, Surgeon, Teacher

Reviewer's Country/Territory: India

Author's Country/Territory: Saudi Arabia

Manuscript submission date: 2023-01-14

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-01-15 09:13

Reviewer performed review: 2023-01-15 09:42

Review time: 1 Hour

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| 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 Grade E: Do not publish |
| Novelty of this manuscript | <input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty |
| Creativity or innovation of this manuscript | <input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation |



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| Scientific significance of the conclusion in this manuscript | <input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance |
| 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Peer-reviewer statements | Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous |
| | Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

SPECIFIC COMMENTS TO AUTHORS

Authors present their experience of "Non-target lung embolization during portal vein embolization due to an unrecognized portosystemic venous fistula" which successfully managed. The English language is apt. The flow is ok but misses many points which are mentioned below. 1. Mention few details and intent of your procedure. 2. Initial portogram was done; why it was not able to identify the communication ? 3. What were the volumes of glue/lipiodol emulasion. 4. Discussion- It needs to be further enriched. A. What was the author’s communication type out of four mentioned ? B. What is the treatment if non target embolization happens ? C. Is the treatment conservative or interventional; is it dose dependent ? D. Portosystemic venous fistula- What changes it induces in organs connecting, what clues can suggest it ? 5. The conclusion may add the clues on imaging for such fistula. 6. The arrows marks are clear; put better ones.



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Peer-review model: Single blind

Reviewer’s code: 03271173

Position: Peer Reviewer

Academic degree: PhD

Professional title: Chief Physician, Professor

Reviewer’s Country/Territory: China

Author’s Country/Territory: Saudi Arabia

Manuscript submission date: 2023-01-14

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-01-15 02:24

Reviewer performed review: 2023-01-19 13:33

Review time: 4 Days and 11 Hours

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| 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 |
| Novelty of this manuscript | <input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty |
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| | Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

SPECIFIC COMMENTS TO AUTHORS

1. History of present illness needs to be rewritten. The patient had colon surgery, but for physical examination, the authors did not report surgical scarring. The accurate values of AFP, CEA and CA-199 etc, should be given even if they are within the normal range. Diabetes mellitus (staging) should be added to the secondary diagnosis in the final diagnosis, and management strategies for diabetes mellitus should be described. 2. The present discussion is simply an anatomical review. Therefore, the hazards, prevention, risk events management of the intrahepatic portosystemic venous shunts and fistulas in preoperative portal vein embolization and how to improve clinician awareness are needed in the discussion.