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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

ESPS manuscript NO: 27163

Title: Impaired liver function attenuates liver regeneration and hypertrophy after portal vein embolization

Reviewer's code: 00051373

Reviewer's country: Taiwan

Science editor: Shui Qiu

Date sent for review: 2016-05-17 13:42

Date reviewed: 2016-05-17 23:08

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

Table 1 and 2 should be consider putting it together as well as a comparison with the regeneration difference between the right and left hepatectomy.



ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology
ESPS manuscript NO: 27163
Title: Impaired liver function attenuates liver regeneration and hypertrophy after portal vein embolization
Reviewer's code: 02451447
Reviewer's country: United States
Science editor: Shui Qiu
Date sent for review: 2016-05-17 13:42
Date reviewed: 2016-05-18 00:45

Table with 4 columns: CLASSIFICATION, LANGUAGE EVALUATION, SCIENTIFIC MISCONDUCT, CONCLUSION. It contains checkboxes for various evaluation criteria like 'Grade A: Excellent', 'Priority publishing', 'Google Search', etc.

COMMENTS TO AUTHORS

The authors reported that impaired liver function attenuates liver regeneration and hypertrophy after portal vein embolization. Comments: 1. The main topic of this paper is impaired liver function. I believe the authors used ICG-R15 to indicate liver function. But the authors did not give any explanation of ICG-R15 in the text, and even not mentioned in the methods of the abstract and main text. 2. How ICG-R15 represents liver function? why chose R15 (min) instead of other time points (10min, or 30min)? please explain? 3. Is there any relationship between the ICG-R15 function test and liver enzyme changes (liver injury), such as ALT, AST or AKP? though the authors mentioned bilirubin, etc. 4. The authors mentioned the background liver disease in this paper, any of the resected liver with cirrhosis or fibrosis (stage)? Any difference between ICG-R15 test and fibrosis stage? 5. How the authors make sure the readers without the confusion of "liver function" in this paper and general meaning of "liver function" in other literature indicating liver enzymes, INR and platelet numbers?



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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

ESPS manuscript NO: 27163

Title: Impaired liver function attenuates liver regeneration and hypertrophy after portal vein embolization

Reviewer's code: 00187828

Reviewer's country: Turkey

Science editor: Shui Qiu

Date sent for review: 2016-05-17 13:42

Date reviewed: 2016-05-18 15:40

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> [Y] Accept
<input type="checkbox"/> [Y] Grade B: Very good	<input type="checkbox"/> [Y] Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> [] High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> [] Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> [] Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> [Y] No	<input type="checkbox"/> [] Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input type="checkbox"/> [Y] No	

COMMENTS TO AUTHORS

The manuscript entitled "Impaired liver function attenuates liver regeneration and hypertrophy after portal vein embolization" by Yumiko Kageyama et al., is an interesting one. The authors, using 63 patients who underwent major hepatectomy and 13 patients who underwent portal vein embolization, calculated regeneration rate correlated with the remnant liver volume. In conclusion, they found that the regeneration rate after right hepatectomy and the hypertrophic rate after PVE were attenuated in the presence of impaired liver function. It is a well-written and presented manuscript.



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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

ESPS manuscript NO: 27163

Title: Impaired liver function attenuates liver regeneration and hypertrophy after portal vein embolization

Reviewer's code: 01560464

Reviewer's country: China

Science editor: Shui Qiu

Date sent for review: 2016-05-17 13:42

Date reviewed: 2016-05-19 15:43

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input type="checkbox"/> No	

COMMENTS TO AUTHORS

1) The clinical retrospective study demonstrated that the liver regeneration rate was significantly lower in patients with an ICG-R15 of $\geq 20\%$ in the right hepatectomy group, but not in the left hepatectomy group. The hypertrophic rate after PVE positively correlated with the regeneration rate after hepatectomy. The hypertrophic rate after PVE was significantly lower in patients with an ICG-R15 of $\geq 20\%$ and a serum total bilirubin of ≥ 1.5 mg/dl. 2) The study is very important guidance for selecting the appropriate treatment and extent of resection for liver cancer. 2) I suggest that the study can be published in the form of retrospective study in World J Hepatology.