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PEER-REVIEW REPORT

Name of journal: World Journal of Transplantation

Manuscript NO: 69354

Title: Enhanced Recovery After Surgery (ERAS) in Liver Transplantation: Challenges

and Feasibility

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03755068 Position: Peer Reviewer Academic degree: MD

Professional title: Consultant Physician-Scientist

Reviewer's Country/Territory: Italy
Author's Country/Territory: Greece

Manuscript submission date: 2021-06-28

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-06-29 05:16

Reviewer performed review: 2021-06-30 20:05

Review time: 1 Day and 14 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [] Grade C: Good [Y] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [] Minor revision [] Major revision [Y] Rejection
Re-review	[Y]Yes []No



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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

statements Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

This was a manuscript which evaluated the enhanced recovery after surgery (ERAS) procedure in liver transplantation (LT). MAJOR COMMENTS: - First of all, I do not understand very well the manuscript format (authors' affiliation, corresponding author's name and so on are missing). - Furthermore, there is a short abstract, a short introduction, a very short methods section (especially if we consider that this seemed a systematic review and that some statistical topics were explained in the result section) and a very long discussion section. - The Authors identified 3 papers after research on Medline, Embase, Ovid and Cochrane. The interval time of research has not been mentioned. The research queries are only 3 words (fast track, enhanced recovery, liver transplantation). - Finally, the discussion section is a more a narration of ERAS rather than an explanation of previously reported results. - English polishing language needed. - Keywords are missing - Biostatistic requirements were not fairly explained MINOR - The predictive role of pre-LT MELD score on post-LT outcome is highly debatable. - The comparison of total length of stay has been incorrectly reported in the text (brackets missing, "-" missing). - Table 1 is not very clear. Table 2 is very long and underlies heterogeneity between studies.



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Peer-review model: Single blind

Reviewer's code: 03474917 Position: Peer Reviewer Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Japan

Author's Country/Territory: Greece

Manuscript submission date: 2021-06-28

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-06-28 23:25

Reviewer performed review: 2021-07-02 00:58

Review time: 3 Days and 1 Hour

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [] Grade C: Good [Y] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [] Minor revision [] Major revision [Y] Rejection
Re-review	[]Yes [Y]No



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Peer-Review: [Y] Anonymous [] Onymous

statements Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

This review paper investigated the existing efforts at implementing ERAS in liver transplantation (LT). The topic is of interest. I have a few comments as follows. 1) I admit the authors' effort to analyze the existing studies regarding ERAS in LT. As expected, however, there have been few studies (3 articles) to be analyzed. Therefore, it is difficult to draw any conclusions from such a small number of studies. I recommend the authors to submit this article as a letter. 2) I think it is important to adopt the idea of ERAS into LT. We have already adopted some items of ERAS into LT, which actually leads to early recovery even in patients undergoing LT. But ERAS can not be applied to all patients. The indication depends on patients' condition. Therefore, I strongly agree with the authors' last sentence that "ERAS is not about the type of operation; ERAS is about the patient."



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Peer-review model: Single blind

Reviewer's code: 03011479 Position: Peer Reviewer

Academic degree: MD, MHSc, PhD

Professional title: Surgeon

Reviewer's Country/Territory: Brazil

Author's Country/Territory: Greece

Manuscript submission date: 2021-06-28

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-07-01 18:08

Reviewer performed review: 2021-07-05 21:48

Review time: 4 Days and 3 Hours

Scientific quality	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[Y] Grade A: Priority publishing [] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [Y] Accept (General priority) [] Minor revision [] Major revision [] Rejection
Re-review	[Y]Yes []No



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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

statements Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Great article about a concept that should be increasingly adopted by the transplant centers. I would like to congratulate the authors on the article, it is very well written.