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## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 25258

**Title:** Practice guidelines for the pathological diagnosis of primary liver cancer: 2015 update

**Reviewer's code:** 00918007

**Reviewer's country:** Italy

**Science editor:** Ze-Mao Gong

**Date sent for review:** 2016-03-03 11:35

**Date reviewed:** 2016-04-01 00:51

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 checked="" 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 type="checkbox"/> Minor revision
		BPG Search:	<input checked="" 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

The Authors report an update of guidelines for pathologic diagnosis of primary liver cancer. A few revisions are needed Major Comments 1) It is not clear why the Authors defined Small HCC (SHCC) tumor less than 3 cm. Actually, according to the Barcellona staging system accepted by the EASL and AASLD, difference in outcome and treatment are mainly based between "very early" and "early stage" which is less than 2 cm and less than 3 cm, respectively. Since the Authors state that there is a different pathologic behaviour and outcome between small HCC and HCC, I suggest to the Authors to use "2 cm" as a cut off for small HCC and not 3 cm 2) The Authors clearly defined pathologic examination (MVI, Satellite nodule, combined HCC-CCC, etc), but there was few details about cholangiocarcinoma. It would be better to define that these guidelines are for hepatocellular carcinoma. Minor Comments 1) On page 15, classification of hepatocellular adenoma is not related to this manuscript; it should be eliminated (high grade displasia is completely another disease) 2) On page 16, difference in MVI is not only due to "sample collection and diagnostic criteria" but also to different type of tumor included in the analysis; if you analyze series with resected tumor from 2 cm



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up to more than 10 cm is obvious that MVI differs significantly (as the Authors report Pawlik's paper).  
This statement should be changed



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### ESPS PEER-REVIEW REPORT

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<input checked="" type="checkbox"/> Grade B: Very good	<input checked="" 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
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		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

### COMMENTS TO AUTHORS

It is of great importance to update the guidelines of the pathological diagnosis for the primary liver cancers. Thus, the Expert Committee organized several seminars for guideline formulation, mainly focusing on the following topics: gross specimen sampling, concepts and diagnostic criteria of small HCC, microvascular invasion, satellite nodules, immunohistochemical and molecular diagnosis. The final version of the 2015 guidelines had been approved at the last Expert Committee meeting, held in April 11, 2015 in Shanghai, China. It is an interesting work, however, the written language should be modified by a native English speaker. Moreover, the authors would better to list the biomarkers for diagnosis, differential diagnosis, prognosis and therapy in a table.