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315-321 Lockhart Road,
Wan Chai, Hong Kong, China

ESPS Peer-review Report

Name of Journal: World Journal of Hepatology

ESPS Manuscript NO: 4287

Title: MR evaluations of biliary malignancy and condition at high-risk for biliary malignancy: current status

Reviewer code: 00160065

Science editor: Song, Xiu-Xia

Date sent for review: 2013-06-25 12:03

Date reviewed: 2013-06-25 19:07

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)		BPG Search:	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input checked="" type="checkbox"/> Minor revision
		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

This is a good review for the diagnosis of cholangiocarcinoma and gallbladder carcinoma by MRI. The author should give more information about the successful or unsuccessful of MRI in diagnosis of malignancy VS benign, the specificity, sensitivity, pitfall of MRI in biliary malignancy diagnosis, etc. There are some typing error in: Page 2 Line 1 biliary to biliary Line 2 are seem to seem Page 4 Line 9 cholangiopancreatigraphy to cholangiopancreatography Line 11 gadolium to gadolinium Page 8 Line 19 ectrahepatic to extrahepatic Line 27 hepatoicellular to hepatocellular Line 30 mass-froming to mass-forming and cholagiocarcinoma to cholangiocarcinoma Page 9 Line 27 chalangiocarcinomas to cholangiocarcinomas Line 32 chaolangiocarcinoma to cholangiocarcinoma Page 10 Line 16 10mm to 10 mm Line 17 infiltrative to infiltrative



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ESPS Peer-review Report

Name of Journal: World Journal of Hepatology

ESPS Manuscript NO: 4287

Title: MR evaluations of biliary malignancy and condition at high-risk for biliary malignancy: current status

Reviewer code: 00068510

Science editor: Song, Xiu-Xia

Date sent for review: 2013-06-25 12:03

Date reviewed: 2013-07-12 00:17

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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"/> [] Existed	<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"/> [] No records	<input type="checkbox"/> [] Rejection
<input type="checkbox"/> [] Grade D (Fair)		BPG Search:	<input type="checkbox"/> [] Minor revision
<input type="checkbox"/> [] Grade E (Poor)	<input type="checkbox"/> [] Grade D: rejected	<input type="checkbox"/> [] Existed	<input type="checkbox"/> [] Major revision
		<input type="checkbox"/> [] No records	

COMMENTS TO AUTHORS

The authors reviewed and compared the usage of imaging in diagnosis and evaluation of patients with risk factors affecting bile duct cancer. The review article covered the recent development of MR imaging contributing to the diagnosis of the bile duct cancer and the patients with risk. It is better if the author can have a table conclude the advantage of MR in diagnosis of each clinical indication.

Minor comment: There are several typing errors throughout the manuscript.



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Name of Journal: World Journal of Hepatology

ESPS Manuscript NO: 4287

Title: MR evaluations of biliary malignancy and condition at high-risk for biliary malignancy: current status

Reviewer code: 00068209

Science editor: Song, Xiu-Xia

Date sent for review: 2013-06-25 12:03

Date reviewed: 2013-07-14 19:41

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

Comment on the manuscript 4287 by Sugita, et al. Magnetic resonance imaging (MRI) is non-invasive and one of the useful imaging modalities for biliary tree diseases. The authors reviewed its availability, especially focusing on biliary malignancy. However, recent studies showed the priority of computed tomography with sagittal and coronal imaging in determination of cancer progression and therefore, the authors should refer to diagnostic ability of other modalities. There are several questions and suggestions for corrections: 1) Differentiation diagnosis should be discussed in each disease. 2) Key findings of MRI in each disease should be summarized in tables, which would make it easier to understand the MRI utility for readers. 3) Comparison with other imaging modalities should be described. 4) 'MR imaging' and 'MRI' should be integrated. 5) There are several misspellings and grammar error.