



ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

ESPS manuscript NO: 21278

Title: Therapeutic and clinical aspects of portal vein thrombosis in patients with cirrhosis

Reviewer's code: 02447007

Reviewer's country: Germany

Science editor: Fang-Fang Ji

Date sent for review: 2015-07-09 16:30

Date reviewed: 2015-07-15 21:15

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 article by Dr. Primignani very nicely summarizes aspects of anticoagulation in patients suffering from liver cirrhosis and portal vein thrombosis, a situation that reflects a clinical dilemma. The manuscript describes important aspects on prophylactic as well as on therapeutic strategies. Furthermore, the author nicely provides arguments that might avoid an inappropriate overrestrictive use of anticoagulants in these patients. However, in my opinion some aspects are missing, which should be discussed more intensively in this manuscript. Suggestions: #1 The author should describe in more detail the reason, why the conventional coagulation tests do not adequately reflect coagulation in liver patients. The literature suggests that these tests might not predict or correlate with bleeding (Dig Dis Sci 1981;26(5):388-393; Clin Lab Med 2009;29(2):265-282; Hepatology 1986;6(1):79-86) They should provide more aspects on coagulation-testing in liver disease, which could have further implications on decision-making in regard to anticoagulant regimens in these patients. Would an expanded testing of coagulation (e.g. thrombin test and thrombelastography) help in this regard? The author should discuss this point. #2 Renal impairment is frequently associated



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with advanced liver disease. The fact that plasma-levels of certain DOACs can be increased under renal impairment should be discussed in this article. #3 The Author should provide a reference for the following assumption. "A platelet count $<50 \times 10^9/L$ and the use of VKA were the only factors more frequently observed in patients with a bleeding episode suspected to be related to anticoagulation therapy." In addition, I enclose a file of the manuscript with some corrected minor formatting errors.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

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Title: Therapeutic and clinical aspects of portal vein thrombosis in patients with cirrhosis

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input checked="" 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 checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		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

The manuscript is a comprehensive review on the therapeutic and clinical aspects of portal vein thrombosis in patients with cirrhosis and is recommended for publication in the World Journal of Hepatology. Below are my comments : 1. Although the pathophysiology of PVT in cirrhosis is mentioned in the introduction section, we suggest authors make it more structured and comprehensive. Besides, the risk factors of PVT in cirrhosis should be added in the literature. 2. The authors could discuss more about the effects and impact of PVT on survival, disease progression, and complication in cirrhosis and liver transplantation. 3. Since the pathophysiology of PVT in cirrhosis can be divided into acute and chronic phase, is there any difference of management between these two phases ? 4. Because the rationale of PVT cirrhosis management is individualized, detailed data of previous studies including baseline characteristic of enrolled patients, efficacy, and safety should be offered in this review article. We suggest the authors to provide a Table to summary studies reporting the management of portal vein thrombosis in cirrhosis. 5. Although the benefit of endovascular procedures for portal vein thrombosis in cirrhosis is controversial, the authors might



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add some information in the review article.