

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Hepatology

ESPS manuscript NO: 13177

Title: Current treatment strategies in hepatocellular carcinoma–still a long way to go

Reviewer code: 02445638

Science editor: Yue-Li Tian

Date sent for review: 2014-08-11 08:16

Date reviewed: 2014-08-19 02:58

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"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<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	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Existing	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

Mlynarsky et al. have written a very interesting and pertinent review covering treatment strategies for patients with hepatocellular carcinoma. They discuss tumor staging methods, resection, several types of tumor ablation, and several systemic therapy trials and their outcomes. The strength of the article is in the good command of knowledge of the subject area that the authors clearly have. The material is also well presented and written with regard to grammar and language. One adjustment in sectional organization, correction of a couple of typographical errors, and expansion by way of a sentence or two of the conclusion to cover the author's opinion on the way clinicians and researchers should go is suggested. Overall classification: very good to excellent. Grading scale: B, see specific suggestions. Specific suggestions: Page 1, line 10. Should read "Hepatitis C Virus (HCV)" then include HCV in abbreviations. Page 1, line 11. Should read "non-alcoholic steatohepatitis (NASH)" then include NASH in abbreviations. Page 4, line 4. Should read "performed" not "preformed". Page 11, line 22. "." Remove extra period It would be helpful to see a simple Figure showing the treatment pathway. One presumably considers tumor ablation before liver transplant, yet the transplant section is placed before the loco-ablative therapies. Either change that around or, probably better, create a simple flow diagram to show what the current decision process is. The review even in the title reflects frustration in treating the disease with appropriate humility, but it would be optimum to point in a future direction- we may have a long way to go but not aimlessly.

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Hepatology

ESPS manuscript NO: 13177

Title: Current treatment strategies in hepatocellular carcinoma—still a long way to go

Reviewer code: 00054993

Science editor: Yue-Li Tian

Date sent for review: 2014-08-11 08:16

Date reviewed: 2014-08-17 20:45

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<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	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Existing	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

This is a concise overview of current treatment strategies in HCC with a critical outlook, helpful for physicians, who take responsibility in making clinical decision for and with patients suffering from the disease. Some minor remarks: How was the completeness of the literature search ascertained? What search criteria and data bases were used? As 85% of HCCs are attributed to chronic HBV and HCV infection and fortunately about 75% of patients survive 5 years after liver transplantation, with tumor recurrence in less than 10%, the authors should include in their review the role of viral re-infection, especially with HCV and address the question of (prophylactic) antiviral treatment after transplantation. The statement in the final paragraph, chapter Systemic therapies on page 11 regarding combined treatment of TACE and sorafenib should be referenced.

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Hepatology

ESPS manuscript NO: 13177

Title: Current treatment strategies in hepatocellular carcinoma–still a long way to go

Reviewer code: 02936324

Science editor: Yue-Li Tian

Date sent for review: 2014-08-11 08:16

Date reviewed: 2014-08-22 22:28

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 type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input checked="" type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> No records	<input checked="" type="checkbox"/> Rejection
<input checked="" type="checkbox"/> Grade D: Fair		BPG Search:	
<input type="checkbox"/> Grade E: Poor	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Existing	<input type="checkbox"/> Minor revision
		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

Dear authors: 1. Your material is properly prepared. 2. It is noted that your manuscript needs careful editing by someone with expertise in technical English editing paying particular attention to English grammar, spelling, and sentence structure so that the goals and results of the study are clear to the reader. 3. The manuscript is lack of innovation, lack of your own point of view, and no prominence to emphasis. 4. Radiotherapy of hepatocellular carcinoma is becoming more and more important. TACE and radiotherapy is the standard of care for patients with non-surgical HCC, but no Mention of radiotherapy in the manuscript. The Editor-in-Chief will make a final Decision for you soon. Yours sincerely, Wang Renben

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Hepatology

ESPS manuscript NO: 13177

Title: Current treatment strategies in hepatocellular carcinoma–still a long way to go

Reviewer code: 02527635

Science editor: Yue-Li Tian

Date sent for review: 2014-08-11 08:16

Date reviewed: 2014-08-24 15:38

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 checked="" type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<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	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Existing	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

This review manuscript focus on the current treatment strategies in hepatocellular carcinoma. It is throughout review the diagnosis , HCC staging and possible treatment modality for HCC such as liver transplantation, loco-ablative therapies and systemic therapies. Publication was recommended after minor revision which was indicated by file attachment.