

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 30352

Title: Surgical management of liver diseases invading the hepatocaval confluence based on IH classification: the surgical guideline in our center

Reviewer's code: 00003940

Reviewer's country: Australia

Science editor: Ze-Mao Gong

Date sent for review: 2016-09-29 19:38

Date reviewed: 2016-10-18 14:43

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input checked="" type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input 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

A very nice report of a difficult group of liver patients with very acceptable outcomes in general. They have defined the patients who will not do well and for whom other treatment modalities should be explored.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 30352

Title: Surgical management of liver diseases invading the hepatocaval confluence based on IH classification: the surgical guideline in our center

Reviewer's code: 01221925

Reviewer's country: Greece

Science editor: Ze-Mao Gong

Date sent for review: 2016-09-29 19:38

Date reviewed: 2016-11-06 18:30

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"/> 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 checked="" type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

This is an interesting paper reviewing the center's experience with a very challenging group of patients with liver malignancies and IVC or hepatic vein involvement. Could the authors please respond to the following comments/questions: 1) Regarding the H categorization, what about the situation where there is involvement of one or two of the hepatic veins only? Is that a factor? 2) There is debate whether Tacrolimus is indeed required if allogeneic vascular graft is needed. Additionally, there is concern about infection transmission. How were these grafts procured and how were they prepared for use? Also, how was the dose of Tacrolimus decided, ie was there a certain target level (which could also make the patient more vulnerable to the complications of immunosuppression)? 3) How many and what size were the lesions in these patients? The question has to do with whether any of these patients would be transplant candidates (even with extended criteria). 4) Can the authors provide a proposed algorithm based on their findings? 5) Can the authors comment on the use of other methods such as Irreversible Electroporation (Nanoknife) for these patients in order to ablate next to the vessels?

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Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 30352

Title: Surgical management of liver diseases invading the hepatocaval confluence based on IH classification: the surgical guideline in our center

Reviewer's code: 00069988

Reviewer's country: Croatia

Science editor: Ze-Mao Gong

Date sent for review: 2016-09-29 19:38

Date reviewed: 2016-11-07 18:51

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input checked="" type="checkbox"/> Grade A: Excellent	<input checked="" 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"/> 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 checked="" 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

How did the authors treat patients with hepatic failure