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## PEER-REVIEW REPORT

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

**Manuscript NO:** 55804

**Title:** Evaluation of intrahepatic manifestation and distant extrahepatic disease in alveolar echinococcosis

**Reviewer's code:** 00054549

**Position:** Peer Reviewer

**Academic degree:** BSc

**Professional title:** Doctor

**Reviewer's Country/Territory:** Australia

**Author's Country/Territory:** Germany

**Manuscript submission date:** 2020-04-03

**Reviewer chosen by:** Jia-Ping Yan

**Reviewer accepted review:** 2020-05-10 22:27

**Reviewer performed review:** 2020-05-14 06:03

**Review time:** 3 Days and 7 Hours

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

## **SPECIFIC COMMENTS TO AUTHORS**

This is an important study in that it provides some evidence that by using a standardised approach to the reporting of imaging undertaken on patients with proven echinococcosis across multiple sites that a) consistency in reporting can be obtained and b) via pooling of data on what is a moderate sized cohort of patients it has led to the preliminary finding that the stage of disease can be linked to the nature of the primary liver lesion (along with whether or not extrahepatic disease is present). Potentially this is publishable but only after some errors of omission and commission are addressed. a) The aims of the study are not succinctly stated either in the abstract nor in the first paragraph of the discussion sections of the manuscript when in fact they need to be. b) Plus the Methods section in the abstract seems to be missing important summary information such as the study being retrospective, the time frame during which the images were acquired as well as what type of statistical analysis was undertaken c) When it comes to the Results section there seems to be some inconsistency in the reporting of the patient demographics which is the case in Table 3 for the cases with extrahepatic disease (where it can be seen that there are some differences in the median ages between Europe and China of these particular patients). However there are no baseline demographic data provided for the wider cohort although it is alluded to in one sentence of the Results section. Either all of the demographic data needs to be provided or none of it. In some respects it would add to the manuscript if the demographic data for the 50 patients at each site could be summarised into one table and this could then incorporate the data in Table 3 d) Table 4 replicates information contained in the text in the results. This needs to be addressed by either removing this table or reducing down the description of the information contained within it within the Results. e) For Figure 3 I am not sure about the utility of combining the Chinese and European data into the Total



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column f) In the discussion I am not sure that you can postulate about the dynamics of this disease via a retrospective analysis of imaging undertaken at different time points for 4 patient cohorts (in the absence of comprehensive follow up data on the patients in each cohort). g) There seems to be some repetition of statements made in the Results section in the Discussion section when the focus needs to be on whether these results fit with what else has been published including from the France Echino network or even the EU Echino network. I could not find a publication from the France Echino network listed in the References This includes for the stage of disease at presentation along with the prevalence in each of the EU countries. If China now has a similar network it needs to also be mentioned h) The summary is way too long when in fact succinct conclusions need to appear at the end of the discussion section i) The implications of this data need to be explored in more detail including the implications for radiologists reporting on such imaging -? in the future does it need to be centralised for example to maintain proficiency. Plus there is now the need for the findings to be prospectively validated on a larger cohort (which is where the Echino networks may come into play). This all seems possible now. j) The limitations also need to be expanded on in the discussion a little more including the fact that this is a retrospective study, there were variations in the type of imaging that was previously undertaken, and ? adequacy of the imaging is a factor in ascertaining the nature of the vascular and biliary involvement. I was not able to ascertain from the manuscript what size cuts were obtained for eg of the CT scans, where it is now known that this now matters for ascertaining the nuances of complex liver lesions k) Hence are there now also implications for what type of imaging needs to be performed moving forward eg modality, etc which has implications for guideline development

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

**Manuscript NO:** 55804

**Title:** Evaluation of intrahepatic manifestation and distant extrahepatic disease in alveolar echinococcosis

**Reviewer's code:** 03003485

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Professor

**Reviewer's Country/Territory:** China

**Author's Country/Territory:** Germany

**Manuscript submission date:** 2020-04-03

**Reviewer chosen by:** Jia-Ping Yan

**Reviewer accepted review:** 2020-05-13 09:33

**Reviewer performed review:** 2020-05-22 11:31

**Review time:** 9 Days and 1 Hour

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

## **SPECIFIC COMMENTS TO AUTHORS**

The authors of the submitted manuscript aim to assess the vascular/biliary involvement and the distant extrahepatic disease manifestations of the different CT morphological patterns in alveolar echinococcosis. The cohort involved 200 patients with hepatic AE of each of four locations (n=50) in Germany, France and China. The analysis showed that different CT morphological patterns of hepatic AE lesions influence vascular/biliary involvement and the occurrence of distant extrahepatic manifestations. Although the analyses are well performed, I have major comments: 1. In my opinion, it is important to specify the association of different morphological types of AE liver lesions and lesion size as vascular/biliary involvement depended on lesion size. It could be appropriate to adjust for this factor in the subsequent analysis. It would be also appropriate to specify the AE lesion location of different CT morphological patterns. 2. In the results' section it would have been appropriate to specify how many patients received surgery and how many Vascular/biliary involvement confirmed in pathology. 3. In my opinion, the analysis would not change the clinical practice.