



PEER-REVIEW REPORT

Name of journal: *World Journal of Gastroenterology*

Manuscript NO: 88517

Title: Transcatheter arterial chemoembolization combined with PD-1 inhibitors and Lenvatinib for hepatocellular carcinoma with portal vein tumor thrombus

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06195974

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Assistant Professor

Reviewer's Country/Territory: United States

Author's Country/Territory: China

Manuscript submission date: 2023-09-27

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-10-13 18:38

Reviewer performed review: 2023-10-13 19:12

Review time: 1 Hour

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| Scientific quality | <input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish |
| Novelty of this manuscript | <input checked="" type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty |
| Creativity or innovation of this manuscript | <input checked="" type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation |



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| Scientific significance of the conclusion in this manuscript | <input checked="" type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance |
| Language quality | <input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection |
| Conclusion | <input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection |
| Re-review | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Peer-reviewer statements | 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 assessed efficacy and safety of the combined treatment based on programmed cell death-1 (PD-1) inhibitor, transcatheter arterial chemoembolization (TACE), and Lenvatinib (PTL regimen) in a cohort of Hepatocellular carcinoma (HCC) subjects with portal vein tumor thrombus (PVTT). Overall, 41 eligible HCC patients with PVTT types I-IV were retrospectively enrolled. They were distributed to either the PTL (n=18) or TACE/Lenvatinib (TL) (n=23) regimen. Primary end-point was the median progression-free survival (mPFS), while median overall survival (mOS), objective response rate (ORR), disease control rate (DCR), and toxicity level served as secondary endpoints. After a median follow-up of 21.8 months, the DCRs were 88.9% and 60.9% in the PTL and TL groups (P=0.046), respectively. mPFS indicated significant improvement (HR=0.25; P