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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Surgery

ESPS manuscript NO: 21288

Title: Does autologous blood transfusion during liver transplantation for hepatocellular carcinoma increase risk of recurrence?

Reviewer's code: 00504131

Reviewer's country: Brazil

Science editor: Fang-Fang Ji

Date sent for review: 2015-07-10 11:29

Date reviewed: 2015-08-25 02:45

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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"/> The same title	<input checked="" 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

Dear Authors Good job but we know the importance of alpha-fetoprotein with recurrence predictor, I think this data would make the job even better



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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Surgery

ESPS manuscript NO: 21288

Title: Does autologous blood transfusion during liver transplantation for hepatocellular carcinoma increase risk of recurrence?

Reviewer's code: 00032726

Reviewer's country: China

Science editor: Fang-Fang Ji

Date sent for review: 2015-07-10 11:29

Date reviewed: 2015-08-13 00:07

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 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 checked="" 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 checked="" 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

Autologous Intraoperative Blood Salvage (IBS) is generally used in liver transplantation to minimized the effect of intraoperative bleeding. However, the peripheral blood of hepatocellular carcinoma (HCC) patients may be contaminated with cancer cells or cancer-inducing virus, which can lead to potential risks of recurrence. In this study, authors investigated the association between the intraoperative use of IBS and survival of HCC patients. According to the data of a postoperative follow-up cohort, they reported that the use of IBS can't influence the survival of HCC patients. This is an interesting study and is useful for clinicians. However, there are several questions should be addressed before further consideration.