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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 7079

Title: Laparoscopic versus open approach to resection of hepatocellular carcinoma in patients with known cirrhosis: systematic review and meta-analysis

Reviewer code: 00506034

Science editor: Qi, Yuan

Date sent for review: 2013-11-04 16:19

Date reviewed: 2013-11-07 21:19

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"/> Existed	<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"/> Existed	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

Authors reviewed the currently available literature comparing laparoscopic to open resection of hepatocellular carcinoma (HCC) in patients with known liver cirrhosis. This review suggests that laparoscopic resection of hepatocellular carcinoma in patients with cirrhosis is safe and may provide improved patient outcomes when compared to the open technique. It has important guiding significance on the clinical treatment of hepatocellular carcinoma (HCC) in patients with known liver cirrhosis.



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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

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Title: Laparoscopic versus open approach to resection of hepatocellular carcinoma in patients with known cirrhosis: systematic review and meta-analysis

Reviewer code: 02540479

Science editor: Qi, Yuan

Date sent for review: 2013-11-04 16:19

Date reviewed: 2013-11-22 06:52

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 type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<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 checked="" type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input checked="" type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

To the authors, your manuscript is well written on a pertinent topic. However there was no new information to the reader. In addition, similar studies and meta-analysis were done and published on the same topic and with the same conclusions.



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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 7079

Title: Laparoscopic versus open approach to resection of hepatocellular carcinoma in patients with known cirrhosis: systematic review and meta-analysis

Reviewer code: 00503536

Science editor: Qi, Yuan

Date sent for review: 2013-11-04 16:19

Date reviewed: 2014-01-21 21:22

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"/> Existed	<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	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

The review manuscript written by Twaij A et al. describes the comparison between laparoscopic and open approach to resection of hepatocellular carcinoma by systematic review and meta-analysis. The review is well written and easily understood. Because laparoscopic approach to resection has been rapidly spread, this kind of analysis is useful for not only surgeons but also all the gastroenterologists. However, there are some concerns that need to be addressed. Minor points, 1. There is no description on the comparative analysis for postoperative complications. 2. The location of the tumor might greatly affect the suitable operative approach as briefly stated in the results section, but how the indication of the operative procedure according to the location of the tumor might affected the present analysis is unclear. 3. The reasons for less intraoperative blood loss and wider resection margins in laparoscopic approach than in open surgery are unclear, and they should be discussed. 4. In the Core Tip, "This review suggests that not only is laparoscopic surgery for patients with hepatocellular carcinoma and known known cirrhosis safe" needs to be revised.



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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 7079

Title: Laparoscopic versus open approach to resection of hepatocellular carcinoma in patients with known cirrhosis: systematic review and meta-analysis

Reviewer code: 02860530

Science editor: Qi, Yuan

Date sent for review: 2013-11-04 16:19

Date reviewed: 2014-01-30 11:41

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 checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<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"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

Comments for authors I would like to appreciate the efforts of authors for undertaking Met analysis on such an important subject. However there are certain limitations which need to be rectified. 1) In introduction section (second para), authors state that "approximately 90% of patients with such chronic liver disease develop HCC". The inference is that 90% of cirrhotic patients develop HCC. Isn't that a very high and odd figure? Authors need to recheck the reference and look for other related references on natural history of cirrhosis. 2) In the same para, authors mention that HCC is the foremost cause of death in such patients. The inference is that HCC is most common cause of death. Again, authors need to recheck and add more reference supporting this. 3) In third para of introduction section, authors state that esophageal varices are limitation or contraindication for liver transplantation. Need to recheck on this and quote more references. 4) In the fourth para of discussion, authors state that "The results of this meta-analysis have shown that surgeons performing laparoscopic procedures returned wider histological tumour margins following resection when compared to the open approach". Authors need to give a suitable explanation for this difference in LR vs OR. 5) Language errors need to be rectified. 6) Similar meta-analysis have been done and published already with same conclusions.