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# PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Oncology

Manuscript NO: 75499

Title: Immunotherapy for advanced hepatocellular carcinoma: from clinical trials to

real-world data and future advances

Provenance and peer review: Invited manuscript; externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03674268 Position: Editorial Board Academic degree: MD, PhD

Professional title: Chief Doctor, Professor

Reviewer's Country/Territory: China

**Author's Country/Territory:** United States

Manuscript submission date: 2022-01-31

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-02-01 08:27

Reviewer performed review: 2022-02-13 13:18

**Review time:** 12 Days and 4 Hours

| Scientific quality | [ ] Grade A: Excellent [Y] Grade B: Very good [ ] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish                                  |
|--------------------|--|
| Language quality   | [ ] Grade A: Priority publishing [ Y] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection |
| Conclusion         | [ ] Accept (High priority) [ ] Accept (General priority) [ Y] Minor revision [ ] Major revision [ ] Rejection                                  |
| Re-review          | [Y]Yes []No  |



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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

statements | Conflicts-of-Interest: [ ] Yes [ Y] No

## SPECIFIC COMMENTS TO AUTHORS

This manuscript introduced immunotherapy for advanced HCC, with a focus on ICIs. Leading clinical trials of ICIs were firstly presented, along with the combination with other therapeutics. Some real-world studies of immunotherapy were further introduced. In general, the manuscript was well-constructed and relatively comprehensive. Several issues listed as followings need to be addressed properly. 1. As a review summarizing the recent progress, the latest data should be used. In the section of INTRODUCTION, more recent literatures should be cited and updated. 2. Authors' own viewpoint should be presented. For instance, advantages, limitations and prospects of clinical trials and real-world studies could be commented. Some potential synergism should be discussed.



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Title: Immunotherapy for advanced hepatocellular carcinoma: from clinical trials to

real-world data and future advances

Provenance and peer review: Invited manuscript; externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05106340 Position: Editorial Board Academic degree: MD, PhD

**Professional title:** Professor

Reviewer's Country/Territory: China

**Author's Country/Territory:** United States

Manuscript submission date: 2022-01-31

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-03-07 02:27

Reviewer performed review: 2022-03-09 10:22

**Review time:** 2 Days and 7 Hours

| Scientific quality | [ ] Grade A: Excellent [ ] Grade B: Very good [ ] Grade C: Good [ Y] Grade D: Fair [ ] Grade E: Do not publish                                 |
|--------------------|--|
| Language quality   | [ ] Grade A: Priority publishing [ Y] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection |
| Conclusion         | [ ] Accept (High priority) [ ] Accept (General priority) [ ] Minor revision [ Y] Major revision [ ] Rejection                                  |
| Re-review          | [ ]Yes [Y]No   |



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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

statements

Conflicts-of-Interest: [ ] Yes [Y] No

### SPECIFIC COMMENTS TO AUTHORS

In this review, the authors want to introduce recent strategies on the immunotherapy for advanced hepatocellular carcinoma (aHCC) from clinical trials, real-world data and future advance. Several limitations regarding this manuscript would be listed as follows, 1. More efforts should be spent on the incidence, exposure risk factors and the immunotherapy regarding aHCC in the 'INTRODUCTION' part. 2. When introducing the background of immunotherapy on HCC, it should be more precisely on this part and more detailed on the immune-microenvironment of advanced HCC. 3. After reviewing the ICI monotherapy, combined ICI immunotherapy and ICI immunotherapy with other therapeutic agents on aHCC, no needs to further stress the irrelevant points on HCC. Cause this review focues on the immunotherapy of advanced HCC, the main body is advanced HCC. 4. Similarly, only references regarding the treatment on advanced HCC could be maintained in this review, the remaing parts should be ignored.



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Title: Immunotherapy for advanced hepatocellular carcinoma: from clinical trials to

real-world data and future advances

Provenance and peer review: Invited manuscript; externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05947170 Position: Peer Reviewer Academic degree: MD

**Professional title:** Doctor

Reviewer's Country/Territory: China

**Author's Country/Territory:** United States

Manuscript submission date: 2022-01-31

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-03-04 01:37

Reviewer performed review: 2022-03-13 04:17

**Review time:** 9 Days and 2 Hours

| Scientific quality | [ ] Grade A: Excellent [ ] Grade B: Very good [ Y] Grade C: Good<br>[ ] Grade D: Fair [ ] Grade E: Do not publish                             |
|--------------------|---|
| Language quality   | [ ] Grade A: Priority publishing [Y] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection |
| Conclusion         | [ ] Accept (High priority) [ ] Accept (General priority) [ Y] Minor revision [ ] Major revision [ ] Rejection                                 |
| Re-review          | [ ] Yes [ Y] No   |



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Peer-reviewer statements

Peer-Review: [Y] Anonymous [] Onymous

Conflicts-of-Interest: [ ] Yes [Y] No

## SPECIFIC COMMENTS TO AUTHORS

This article systematically reviewed the clinical trials and real-world data of immunotherapy, especially ICIS monotherapy and combination therapy in the field of HCC treatment, and explored the new progress of HCC immunotherapy, which provided certain reference for the later development of relevant experiments and the selection of clinical treatment strategies for HCC. Suggestions: 1. The section of "clinical trials" has three subheadings: "effectiveness, safety and economy", put"Immunotherapy combination with locoregional ablation" under "Combination Therapy" in "Effectiveness". The safety conclusions in the monotherapy and combination therapy should be placed under "Safety", and " Immunotherapy in LT " should be placed under "real-world data"; 2. It is recommended to list each clinical trial, including Phase, intervention measures, and start- end times of the experiment, outcomes, etc.; 3. The article is too long, and the content of the full text need to be simplified.