



ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

ESPS manuscript NO: 14489

Title: Spectrum of biliary complications following live donor liver transplantation

Reviewer’s code: 02861131

Reviewer’s country: Moldova

Science editor: Yue-Li Tian

Date sent for review: 2014-10-20 09:55

Date reviewed: 2014-12-08 07:31

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 type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
	<input type="checkbox"/> Grade D: Rejected	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

Manuscript Number: 14489 Manuscript Title: Biliary Complications after Living Donor Liver Transplantation

Comments To Authors

GENERAL COMMENTS

(1) The importance of the research and the significance of the research contents; The authors of this article have been evaluated the biliary complications in recipients and living donors after liver transplantation. The importance and significant of the research contents is high, because in the past years, attention to the issue of biliary complications from living donor liver transplant has grown. Freise CE et al. suggest that risk of biliary complications influenced recipient morbidity in living donor liver transplant, which are twice as common as seen with deceased donor liver transplant.

(2) The novelty and innovation of the research; Simoes Pet al. has presented anatomical considerations in the biliary tract, recipient, and donor biliary complications after living donor liver transplantation. The novelty of the research represents the idea that biliary complications occur because of several anatomical and technical reasons and the management depends on a multi-disciplinary approach (surgery, hepatology and radiology).

(3) Presentation and readability of the manuscript; Review is not very well organized.

1. Without abstract 2. Introduction is very short; it should present: ? background information that



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provide clarity to the subject of discussion (not only about living donor liver transplant, but more information about biliary complications in recipients and living donors after liver transplantation), ? the aim of the research 3. Without conclusions (4) Ethics of the research. Not relevant for this article (this article is review of medical articles) Bibliography 1. Freise CE, Gillespie BW, Koffron AJ, et al. Recipient morbidity after living and deceased donor liver transplantation: findings from the A2ALL Retrospective Cohort Study. *Am. J. Transplant* 2008;8(12):2569-79. doi:10.1111/j.1600-6143.2008.02440.x. SPECIFIC COMMENTS Title: reflects the major topic and contents of the study. Abstract: Without abstract The abstract should include the same sections as the main text in a succinct form – introduction and objective, main topics and conclusion Introduction: is very short; it should present: ? background information that provide clarity to the subject of discussion (not only about living donor liver transplant, but more information about biliary complications in recipients and living donors after liver transplantation), ? the aim of the research Body of the review ANATOMICAL CONSIDERATIONS IN THE BILIARY TRACT Readers would find very useful for understanding anatomical consideration of biliary tree arterial irrigation pictures, diagrams or schemes. RECIPIENT BILIARY COMPLICATIONS DONOR COMPLICATIONS The morbidity classification of Clavien¹ designed for liver transplantation recipients and Broelsch et al² adaptation of Clavien classification for the living donor situation should be adequately explained and cited. Discussion Simoes Pet al. present the idea that Biliary complications after living donor liver transplant are less likely to respond to endoscopic therapy than in deceased donor liver transplant, so preventive strategies to avoid these are important. Readers would find very useful to have separate part with preventive strategies for recipients and donors. Conclusions The authors did not present conclusion References: references are appropriate, relevant, and updated. Tables and figures: tables and figures are relevant Bibliography 1. Clavien PA, Camargo CA Jr, Croxford R, et al. Definition and classification of negative outcomes in solid organ transplantation: application in liver transplantation. *Ann Surg.* 1994;220:109 -120. 2. Broelsch CE, Frilling A, Testa G, et al. Living donor liver transplantation in adults. *Eur J Gastroenterol Hepatol.* 2003;15:3- 6.



ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

ESPS manuscript NO: 14489

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Reviewer's country: Italy

Science editor: Yue-Li Tian

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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 type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
		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

The manuscript is very nicely written; English language use is excellent, the organization of the manuscript is rational, the illustrations provided are well-positioned and constitute great additions to the paper, and a well-balanced summary of biliary complications is offered to readers. Only several suggestions: the Clavien classification should be adequately explained and cited. Manuscript length can be reduced somewhat. A more clinical "cut" can be offered, in the sense of when these complications can be suspected (not only their diagnosis using gold standard techniques), and emphasizing the already mentioned differential risk (right lobe vs left lobe donation, for instance) according to the different transplant scenarios. As well, a word on prevention of these strictures is warranted; should stents be placed preemptively? what is new in the field? Finally, the explanation of the biliary tree arterial irrigation is highly pertinent; I would encourage a diagram which illustrates this particular point, which I think readers would find very useful.



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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology
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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 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 type="checkbox"/> Duplicate publication	
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		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

Authors reviewed an important issue after living donor liver transplantation. Well presented and readable manuscript. I only recommend to include these suggested articles results in analysis and tables of the manuscript. 1-Donor complications among 500 living donor liver transplantations at a single center. Ozgor D, Dirican A, Ates M, G?n?ltas F, Ara C, Yilmaz S. Transplant Proc. 2012 Jul-Aug;44(6):1604-7. doi: 10.1016/j.transproceed.2012.04.002. 2- Hospitalization rates before and after adult-to-adult living donor or deceased donor liver transplantation. Merion RM, Shearon TH, Berg CL, Everhart JE, Abecassis MM, Shaked A, Fisher RA, Trotter JF, Brown RS Jr, Terrault NA, Hayashi PH, Hong JC; A2ALL Study Group. Ann Surg. 2010 Mar;251(3):542-9. doi: 10.1097/SLA.0b013e3181ccb370.