

Wei qi Rong. MD  
Department of Hepatobiliary Surgery  
National Cancer Center/National Clinical Research Center for Cancer/Cancer  
Hospital  
Chinese Academy of Medical Sciences and Peking Union Medical College  
Beijing 100021  
P.R. China

Jan. 3rd, 2024

Subject: Revision Requested for Manuscript NO: 89729

Manuscript NO: 89729

Title: "Telomerase-related advances in hepatocellular carcinoma: A bibliometric and visual analysis"

Dear editors in **“World Journal of Gastroenterology”**,

We revised the manuscript and answered reviewer’s questions/comments with point by point hereunder according to the requirements in your letter.

Hence, we are re-submitting here with the revised manuscript entitled " Telomerase-related advances in hepatocellular carcinoma: A bibliometric and visual analysis " to World Journal of Gastroenterology.

To easily distinguish my answers from your and reviewer’s questions/comments, we highlighted all of our answers in blue while keeping your and reviewer’s questions/comments in black in the Response Letter.

Thank you very much for your time and consideration.

I am looking forward to hearing from you.

Sincerely yours

WeiQi Rong MD

Phone: +86-010-87787100 (office)

E-mail: [dr\\_rongweiqi@163.com](mailto:dr_rongweiqi@163.com)

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**Reviewer #1:**

Hai-Yang Li et al, performed a bibliometric analysis to systematically assess the current state of research on HCC-telomerase. The study is interesting, since it represent an emerging topic in hepatocellular carcinoma.

*Reply:* Thank you very much indeed for your comments.

Nevertheless, the study presents major limitations that need to be addressed, as follows:

1) Introduction. The authors stated that “Surgical resection is still the main treatment option for patients with HCC. This is not completely true, since also locoregional therapies and liver transplantation may be considered as curative therapies. Please include this in the introduction and consider to cite the following papers: - Imaging appearance of treated hepatocellular carcinoma. World J Hepatol. 2013 Aug 27;5(8):417-24. - Survival of patients with hepatocellular carcinoma (HCC) treated by percutaneous radio-frequency ablation (RFA) is affected by complete radiological response. PLoS One. 2013 Jul 29;8(7):e70016.

*Reply:* Thank you very much indeed for your comments and recommendations for improving our manuscript. We have duly considered your feedback and addressed the concerns raised regarding the limitations in our study. In response to your first point regarding the introduction, we have revised the relevant paragraph in the manuscript.

The updated text, found at lines 154-156, now accurately reflects that the treatment of hepatocellular carcinoma (HCC) encompasses various modalities, including surgical resection, liver transplantation, local ablation, chemoembolization, and molecular targeted therapy. We appreciate your insight into the broader spectrum of therapeutic options and have integrated this information for a more comprehensive overview. Furthermore, we have included citations to support this expanded perspective, as suggested. The references to the papers you recommended, namely "Imaging appearance of treated hepatocellular carcinoma. *World J Hepatol.* 2013 Aug 27;5(8):417-24" and "Survival of patients with hepatocellular carcinoma (HCC) treated by percutaneous radio-frequency ablation (RFA) is affected by complete radiological response. *PLoS One.* 2013 Jul 29;8(7):e70016," have been appropriately added to the manuscript. We trust that these modifications address your concerns adequately. Once again, we appreciate your thoughtful input, which has undoubtedly contributed to the overall improvement of our manuscript.

2) Why weren't other search engines used? Describe the reasons.

**Reply:** Thank you very much indeed for your comments. At the outset, our decision to primarily utilize WoSCC was rooted in its status as the largest database, encompassing a vast majority of literature relevant to our research topic. This comprehensive coverage was deemed sufficient to support our efforts in drawing meaningful conclusions.

To ensure the rigor of our findings, we have incorporated additional literature from PubMed in the latest version of the manuscript, encompassing relevant publications up to December 2023. This supplementary search yielded a total of 526 pertinent articles. After excluding duplicates that were already present in WoSCC, 39 additional publications from PubMed were included in our analysis. The combination of WoSCC and PubMed sources has strengthened the comprehensiveness of our study, enhancing the reliability and validity of our conclusions.

3) The conclusions paragraph should be one of the most relevant section of the paper, but it is concise. Extend the conclusions in both the abstract and the paper.

**Reply:** Thank you very much indeed for your comments. We acknowledge the importance of this section as a critical component of the paper and appreciate your feedback. In the revised version, we have refined and expanded upon the conclusions, providing a more nuanced and detailed summary of the key insights derived from our study. We believe that these enhancements contribute to a more thorough understanding of the implications and significance of our research.

4) The English language may be improved. A language editing by a native speaker is necessary.

**Reply:** Thank you very much indeed for your comments. We have taken your suggestion seriously and engaged the services of a native English speaker for thorough language editing. The manuscript has undergone a careful review to enhance clarity, coherence, and overall language proficiency. For your reference, we have included a language editing certificate in the uploaded materials, confirming that the manuscript has undergone professional language editing by a native speaker.

(1) Science editor:

1 Scientific classification: Grade B.

**Reply:** Thank you very much indeed for your comments.

2 Language classification: Grade B.

**Reply:** Thank you very much indeed for your comments.

3 Specific comments: (1) Please provide the Biostatistics statement.

**Reply:** Thank you very much indeed for your comments.

(2) Please provide the Language certificate. The English-language grammatical presentation needs to be improved to a certain extent. There are many errors in grammar and format, throughout the entire manuscript. Before final acceptance, the authors must

provide the English Language Certificate issued by a professional English language editing company. Please visit the following website for the professional English language editing companies we recommend: <https://www.wjgnet.com/bpg/gerinfo/240>.

*Reply:* Thank you very much indeed for your comments. We have taken your suggestion seriously and engaged the services of a native English speaker for thorough language editing. The manuscript has undergone a careful review to enhance clarity, coherence, and overall language proficiency. For your reference, we have included a language editing certificate in the uploaded materials, confirming that the manuscript has undergone professional language editing by a native speaker.

(3) Please provide the Figures cited in the original manuscript in the form of PPT. All text can be edited, including A,B, arrows, etc.

*Reply:* Thank you very much indeed for your comments. We have included all the figures cited in the original manuscript in the form of a PowerPoint (PPT) file in the latest upload. All text elements, including labels (A, B), arrows, and other annotations, are editable for all figures except for Figure 4A. Regarding Figure 4A, this image was created using VOSviewer, and we have decided not to make any modifications to ensure that the visualization is presented in its optimal state. However, if there is a specific need for text or other elements to be editable in Figure 4A, please let us know, and we can make the necessary adjustments accordingly. We appreciate your attention to detail and hope that the provided PowerPoint file meets your expectations. If you have any further requests or if additional modifications are required, please feel free to communicate them. We are committed to ensuring the clarity and flexibility of the figures in our manuscript. Thank you for your understanding and collaboration.

With respect to the reference to the Figure, please verify if it is an original image created for the manuscript, if not, please provide the source of the picture and the proof that the Figure has been authorized by the previous publisher or copyright owner to allow it to be redistributed. All legends are incorrectly formatted and require a general title and explanation for each figure. Such as Figure 1 title. A: ; B: ; C: .

**Reply:** Thank you very much indeed for your comments. I can confirm that all the figures included in our manuscript are original images created specifically for this research using R package Bibliometrix or VOSviewer software. There is no reliance on external images or figures from other sources, eliminating any potential copyright issues. Furthermore, we have duly addressed the formatting of the figure legends in accordance with your guidance.

(4) Please obtain permission for the use of picture(s). If an author of a submission is re-using a figure or figures published elsewhere, or that is copyrighted, the author must provide documentation that the previous publisher or copyright holder has given permission for the figure to be re-published, and correctly indicate the reference source and copyrights. For example, “Figure 1 Histopathological examination by hematoxylin-eosin staining (200 ×). A: Control group; B: Model group; C: Pioglitazone hydrochloride group; D: Chinese herbal medicine group. Citation: Yang JM, Sun Y, Wang M, Zhang XL, Zhang SJ, Gao YS, Chen L, Wu MY, Zhou L, Zhou YM, Wang Y, Zheng FJ, Li YH. Regulatory effect of a Chinese herbal medicine formula on non-alcoholic fatty liver disease. World J Gastroenterol 2019; 25(34): 5105-5119. Copyright ©The Author(s) 2019. Published by Baishideng Publishing Group Inc[6]”. And please cite the reference source in the references list. If the author fails to properly cite the published or copyrighted picture(s) or table(s) as described above, he/she will be subject to withdrawal of the article from BPG publications and may even be held liable.

**Reply:** Thank you for your attention and guidance regarding the use of images in our manuscript. I would like to assure you that there is no reliance on external images or figures from other sources in our submission. All figures presented in our manuscript are original images created for this research using R package Bibliometrix or VOSviewer software. Therefore, we can confirm that there are no copyright or permission issues associated with the figures in our manuscript. We understand the importance of proper citation and permissions and have taken the necessary steps to ensure compliance.

(5) Please don't include any \*, #, †, §, ‡, ¥, @....in your manuscript; Please use superscript numbers for illustration; and for statistical significance, please use superscript letters. Statistical significance is expressed as aP <0.05, bP <0.01 (P > 0.05 usually does not need to be denoted). If there are other series of P values, cP <0.05 and dP <0.01 are used, and a third series of P values is expressed as eP <0.05 and fP <0.01.

*Reply:* Thank you for your specific instructions regarding the use of symbols and notation in our manuscript. We have diligently revised the document to comply with your guidelines.

4 Recommendation: Conditional acceptance.

*Reply:* Thank you very much indeed for your comments.

(2) Company editor-in-chief:

I have reviewed the Peer-Review Report, the full text of the manuscript, the relevant ethics documents, and the English Language Certificate, all of which have met the basic publishing requirements of the World Journal of Gastroenterology, and the manuscript is conditionally accepted.

*Reply:* Thank you very much indeed for your comments.

I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report, Editorial Office's comments and the Criteria for Manuscript Revision by Authors. However, the quality of the English language of the manuscript does not meet the requirements of the journal. Before final acceptance, it is recommended that the author(s) provide the English Language Certificate issued by a professional English language editing company. Please visit the following website for the professional English language editing companies we recommend: <https://www.wjgnet.com/bpg/gerinfo/240>. When revising the manuscript, it is recommended that the author supplement and improve the highlights of the latest cutting-edge research results, thereby further improving the content of the manuscript.

**Reply:** Thank you very much indeed for your comments. We have taken your suggestion seriously and engaged the services of a native English speaker for thorough language editing. The manuscript has undergone a careful review to enhance clarity, coherence, and overall language proficiency. For your reference, we have included a language editing certificate in the uploaded materials, confirming that the manuscript has undergone professional language editing by a native speaker.

To this end, authors are advised to apply PubMed, or a new tool, the RCA, of which data source is PubMed. RCA is a unique artificial intelligence system for citation index evaluation of medical science and life science literature. In it, upon obtaining search results from the keywords entered by the author, "Impact Index Per Article" under "Ranked by" should be selected to find the latest highlight articles, which can then be used to further improve an article under preparation/peer-review/revision. Please visit our RCA database for more information at: <https://www.referencecitationanalysis.com/>, or visit PubMed at: <https://pubmed.ncbi.nlm.nih.gov/>.

**Reply:** Thank you very much indeed for your comments. To ensure the rigor of our findings, we have incorporated additional literature from PubMed in the latest version of the manuscript, encompassing relevant publications up to December 2023. This supplementary search yielded a total of 526 pertinent articles. After excluding duplicates that were already present in WoSCC, 39 additional publications from PubMed were included in our analysis. The combination of WoSCC and PubMed sources has strengthened the comprehensiveness of our study, enhancing the reliability and validity of our conclusions.