

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

ESPS manuscript NO: 16034

Title: MANAGEMENT OF HEPATOCELLULAR CARCINOMA IN THE ELDERLY

Reviewer's code: 00052339

Reviewer's country: Japan

Science editor: Fang-Fang Ji

Date sent for review: 2014-12-24 11:38

Date reviewed: 2015-01-27 15:35

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	PubMed Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" 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	
<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

MANAGEMENT OF HEPATOCELLULAR CARCINOMA IN THE ELDERLY Reviewer's comments
 In general elderly patients may have more disadvantage to be treated by surgical operation or other technique rather than younger patients. Since the management of chronic hepatitis or liver cirrhosis has developed in recent clinical area, the average of age of patients with hepatocellular carcinoma (HCC) has been higher, and the aged patients with HCC have been targets of regular treatment. This paper discussed the difference of overall survival and disease free survival between younger and aged patients according to different treatment, and reached the conclusion that most of data revealed no difference in two age groups. To reach the conclusion the following points should be addressed: #1 HCC is developed from chronic hepatitis or liver cirrhosis. Is the background of liver disease in aged patients with HCC similar to young patients? The surgical resection is very difficult in B or C stage of Child-Pugh, hence the aged patients reported in the reference papers may be good condition such as chronic hepatitis, but not liver cirrhosis. The author can give the data about ratio of liver cirrhosis in the aged patients with HCC. It is possible that the aged patients might be selected because of good or reserved liver function. #2 As well as background liver disease, complication



BAISHIDENG PUBLISHING GROUP INC

8226 Regency Drive, Pleasanton, CA 94588, USA

Telephone: +1-925-223-8242

Fax: +1-925-223-8243

E-mail: bpgoffice@wjgnet.com

<http://www.wjgnet.com>

such as cardiovascular disease or renal disease should be analyzed in the aged patients because there was no difference OS or DFS in young or aged patients. The aged patients analyzed here may have less complication.



ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

ESPS manuscript NO: 16034

Title: MANAGEMENT OF HEPATOCELLULAR CARCINOMA IN THE ELDERLY

Reviewer’s code: 00073425

Reviewer’s country: Poland

Science editor: Fang-Fang Ji

Date sent for review: 2014-12-24 11:38

Date reviewed: 2015-01-26 04:46

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	PubMed Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" 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	
<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 type="checkbox"/> Minor revision
		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

The paper presents the management of hepatocellular carcinoma in the elderly. The issue is very interesting and important for clinical practice. However, the paper should be a meta analysis based on previously performed and published studies. The Authors should describe what criteria they would use to select analyzed studies. In the paper the Authors devoted a separate subsection to a definition and clinical implication of the elderly. In my opinion it is unnecessary for understanding the results. The paper should more extensively present epidemiology of HCC, instead. The Table 1 and the Table 2 do not contain all references cited in the section Resection and Radiofrequency ablation.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

ESPS manuscript NO: 16034

Title: MANAGEMENT OF HEPATOCELLULAR CARCINOMA IN THE ELDERLY

Reviewer's code: 00012963

Reviewer's country: Australia

Science editor: Fang-Fang Ji

Date sent for review: 2014-12-24 11:38

Date reviewed: 2015-01-09 14:11

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	PubMed Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" 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"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input checked="" type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		[Y] No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		[Y] No	

COMMENTS TO AUTHORS

The topic of this paper is very salient for clinicians who are increasingly expected to make management decisions in older patients with a HCC diagnosis. I wish to raise some points of clarification: 1. Providing details of the literature search conducted- what were the databases searched, what years did it cover and what search terms were used? 2. What criteria were used to select papers included in this review? 3. Consistent referencing and cross-referencing of the papers selected for this review is needed. For example the section titled "HCC outcome in the elderly" refers to "retrospective subanalyses of observational, in-field surveys" Three papers are cited here and it is unclear if this the entirety of available evidence, or whether they were selected based upon some unspecified criteria. Are the conclusions relating to long-term survival drawn from the same papers, or others, not cited? The reference list gives reference #29 as being a paper by Kim et al, but a paper by Yun et al is referenced instead and this needs attention. 4. The section headed "Resection" states that "many authors agree that age is not a risk factor for resection". This statement needs referencing. This section is supported by Table 1, which includes 6 papers, although a total of 15 papers are being referred to in this section. Reasons why they are not included in the Table need stating, to rule out



BAISHIDENG PUBLISHING GROUP INC

8226 Regency Drive, Pleasanton, CA 94588, USA

Telephone: +1-925-223-8242

Fax: +1-925-223-8243

E-mail: bpgoffice@wjgnet.com

<http://www.wjgnet.com>

selection bias. 5. The RFA section. Two retrospective Japanese studies are presented, but only one is cited. Studies 60-62 are not included in Table 2 and the reason for their exclusion needs clarification. 6. The Conclusion states that “any other therapeutic option should be offered to aged patients” needs qualifying (with regards to available functional reserve and general fitness etc). 7. A caveat regarding the fact that these recommendations emanate as a result of a review of outcomes in carefully selected patients needs to be included. 8. The paper is well written, but a careful proofreading is required. Some examples: The abstract: The sentence commencing with “Conversely major resection” needs rephrasing, as does the one starting with “Available data”. Body of the paper: Second sentence needs rephrasing. The Epidemiological considerations section “more frequently mono-pauci focal” needs attention. Tables 1 and 2: Is the column titled “survival” refer to overall, or disease-specific survival? The last column is headed DSF- I assume this refers to DFS.