



PEER-REVIEW REPORT

Name of journal: *World Journal of Gastroenterology*

Manuscript NO: 82779

Title: Current and novel approaches in the pharmacological treatment of hepatocellular carcinoma

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06148048

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: Mexico

Manuscript submission date: 2022-12-27

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-12-28 05:36

Reviewer performed review: 2022-12-31 06:21

Review time: 3 Days

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| Scientific quality | <input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish |
| Novelty of this manuscript | <input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty |
| Creativity or innovation of this manuscript | <input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation |



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| Scientific significance of the conclusion in this manuscript | <input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance |
| Language quality | <input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection |
| Conclusion | <input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection |
| Re-review | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Peer-reviewer statements | Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous |
| | Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

SPECIFIC COMMENTS TO AUTHORS

This study reviews the new pharmacological approaches currently available against liver cancer, such as immune checkpoint inhibitors (ICIS), monoclonal antibodies against programmed cell death 1 (PD-1) and drug repurposing. The authors' arguments are sound, well-documented and well-documented, but there are still the following problems that suggest corrections. 1. The full stop after the abstract should be corrected to a colon. 2. The use of abbreviations in the abstract should be minimized. 3. Table 2 and Table 3 should be placed after the first cited paragraph in the text. The current position of Tables is not clear enough.



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Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06475416

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: Mexico

Manuscript submission date: 2022-12-27

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-01-03 02:20

Reviewer performed review: 2023-01-04 08:11

Review time: 1 Day and 5 Hours

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| Scientific quality | <input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish |
| Novelty of this manuscript | <input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty |
| Creativity or innovation of this manuscript | <input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation |



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| Scientific significance of the conclusion in this manuscript | <input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance |
| Language quality | <input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection |
| Conclusion | <input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection |
| Re-review | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Peer-reviewer statements | Peer-Review: <input type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous |
| | Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

SPECIFIC COMMENTS TO AUTHORS

At present, hepatocellular carcinoma (HCC) remains a malignant tumor with high morbidity and mortality in many countries. Unfortunately, systemic medication is not effective in most cases due to late diagnosis and tumor resistance. This review reviews the major pharmacological approaches, preclinical studies, and approved and ongoing liver clinical trials against HCC, which are expected to help improve the efficacy of HCC. 1. Considering the time and cost of new drug research and development, the reuse of old drugs and drug combination therapy is a wise idea. Can the authors further refine the combination of specific drugs and the order of selection that can provide clinical options in situations where treatment response is poor? 2. What are the upgrades between the new drugs and the existing drugs according to their pharmacological effects? Or is it just a different cellular pathway? If it is the latter, how do the authors view other possible unknown cellular pathways that contribute to the development and progression of HCC?



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Peer-review model: Single blind

Reviewer's code: 06475363

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: Mexico

Manuscript submission date: 2022-12-27

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-01-03 01:20

Reviewer performed review: 2023-01-09 01:01

Review time: 5 Days and 23 Hours

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| Scientific quality | <input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish |
| Novelty of this manuscript | <input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty |
| Creativity or innovation of this manuscript | <input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation |



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| Scientific significance of the conclusion in this manuscript | <input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance |
| Language quality | <input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection |
| Conclusion | <input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection |
| Re-review | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Peer-reviewer statements | Peer-Review: <input type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous |
| | Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

SPECIFIC COMMENTS TO AUTHORS

The current potential and new pharmacological methods, including immunotherapy, drug combination and drug repositioning, should be helpful to improve the prognosis of HCC patients. This review shows that combination therapy has more significant benefits for HCC patients than monotherapy. In addition, evidence has been provided that several non neoplastic drugs may be useful in the treatment of this cancer. In addition, compared with the current systemic treatment, immunotherapy has significant effects in some cases, and is promising for drug treatment of advanced liver cancer.