

PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 74031

Title: Contrast-Enhanced Ultrasound Manifestations of Synchronous Combined Hepatocellular- Cholangiocarcinoma and Hepatocellular Carcinoma: A Case Report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05185768

Position: Editorial Board

Academic degree: MD, MSc

Professional title: Assistant Professor

Reviewer's Country/Territory: Thailand

Author's Country/Territory: China

Manuscript submission date: 2021-12-12

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-12-18 02:19

Reviewer performed review: 2021-12-18 06:49

Review time: 4 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
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 type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input checked="" 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

Thank you very much for the opportunity to review this manuscript. This is a case report highlighted the role of CEUS in liver tumor. I have a few suggestion as following;

1. Abstract: not clear about the accuracy of CEUS, is it better than CECT? please clarify. AFP and CA19-9 increased? it was not state in the main text.
2. Introduction part: authors mentioned that "the treatment schemes and outcomes of the two diseases are different" so please clarify. Apart from surgical resection, which treatment is different?
3. Physical examination: please descript PE finding such as BMI, chronic liver stigmata, liver and spleen size
4. Laboratory tests: please add Hb level, did patient have splenomegaly? why she had low platelet count? Please add TB/DB/ALP/albumin/globulin. Please add the normal value of PIVKA-II, AFP and CA19-9. Hepatitis B viral load should be investigated in this patient.
5. Imaging examination: Why patient have to investigate both CEUS, CECT? What is the diff between these 2 investigations. As authors mentioned only the diagnosis was considered cirrhosis with a malignant tumor from both investigations.
6. Final diagnosis: the diagnosis come from imaging result or histopathology? If from histopathology, this should be probably diagnosis or Diff dx
7. Discussion: I think that the management that could cure this patient should be liver transplantation. Please disscuss this management in discussion part. and pre-operative diagnosis could change the management?How? please discuss as well.

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Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05138559

Position: Associate Editor

Academic degree: MD

Professional title: Professor

Reviewer's Country/Territory: Italy

Author's Country/Territory: China

Manuscript submission date: 2021-12-12

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-01-02 15:31

Reviewer performed review: 2022-01-07 11:21

Review time: 4 Days and 19 Hours

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
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 type="checkbox"/> Accept (General priority) <input checked="" 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="radio"/>] Anonymous [<input type="radio"/>] Onymous
	Conflicts-of-Interest: [<input type="radio"/>] Yes [<input checked="" type="radio"/>] No

SPECIFIC COMMENTS TO AUTHORS

In this case the authors describe the simultaneously rare occurrence of two different hepatic tumors (hepatocellular-cholangiocarcinoma [CHC] and hepatocellular carcinoma [HCC]) and most importantly he showed how a non-invasive refined ultrasound technique (contrast enhanced) was able to distinguish these 2 liver masses mainly on the basis of the arterial and wash-out phases of the enhancement. The case is interesting and quite well written. However some criticism has to be manifested. 1.

First of all in order to replicate such an approach more technicality specifications need to be accurately reported with the adding of some comments: the type of ultrasound equipment; the transducer, the setting of the machine both for B-mode and color: frame rate, PRF, nyquist limits, frame rate etc ; is there a preset by the manufacturer? One major point in my view is that not all machines are interchangeable especially as far as the Doppler module is concerned. Moreover the type of contrast should be specified underscoring its availability on the market. 2. They mentioned too succinctly the pathophysiology underlying the different behavior of contrast in the two neoplastic masses 3. In addition it would be nice to report in a table side by side the more salient ultrasound differentials between the CHC and HCC. 4. What is the added value of contrast ultrasound with respect to CT scan? 5. They reported "The patient had a history of drinking (50 g/d)" but they should specify if wine, liquor etc.