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PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 79465

Title: Effect of liver transplantation with primary hyperoxaluria type 1: Five case reports and review of literature

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03034605
Position: Editorial Board
Academic degree: MBBS, MCh, MD
Professional title: Assistant Professor, Attending Doctor, Chief Doctor, Consultant Physician-Scientist, Surgeon
Reviewer's Country/Territory: India
Author's Country/Territory: China

Manuscript submission date: 2022-10-09

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-10-23 02:14

Reviewer performed review: 2022-11-01 12:35

Review time: 9 Days and 10 Hours

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Language quality	[ ] Grade A: Priority publishing [ ] Grade B: Minor language polishing [Y] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	[ ] Accept (High priority) [ ] Accept (General priority) [ ] Minor revision [Y] Major revision [ ] Rejection

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Re-review	[ ] Yes [Y] No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [ ] Onymous
	Conflicts-of-Interest: [ ] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

The authors have presented a case series of five cases of primary hyperoxaluria treated by liver transplantation. I have following comments regarding the manuscript. 1. Title: Please revise the title. It is not a case report but a case series. 2. Resuts: a. What is the meaning of age of onset? b. Please provide details regarding whether LT and KT were done in same sitting or separate sitting? c. Please mention which liver segments were used for LT in all the patients. 3. Discussion: This section is too elaborate and should be concised. 4. There are several grammatical and spelling mistakes throughout the manuscript that should be corrected.

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Reviewer's code: 05260725
Position: Peer Reviewer
Academic degree: FRCS (Gen Surg)
Professional title: Surgeon
Reviewer's Country/Territory: Turkey
Author's Country/Territory: China

Manuscript submission date: 2022-10-09

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-10-29 09:49

Reviewer performed review: 2022-11-02 14:29

Review time: 4 Days and 4 Hours

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Language quality	[Y] Grade A: Priority publishing [ ] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	[ ] Accept (High priority) [ ] Accept (General priority) [Y] Minor revision [ ] Major revision [ ] Rejection
Re-review	[Y] Yes [ ] No

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Peer-reviewer statements	Peer-Review: [Y] Anonymous [ ] Onymous
	Conflicts-of-Interest: [ ] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

They report that transplantation strategies should be adopted for patients at different stages of renal function, with pre-LT representing a preferable treatment option. İt kept in mind that this misdiagnosis is the rarity along with a high degree of heterogeneity of clinical . 3.1 General information and clinical manifestations it should be removed . Laboratory examination of part has a table. there for it furher should be not added. The dissuscion includes " Liver transplantation, as one of the treatments for genetic metabolic diseases, can produce remission or partial remission, and prevents metabolic crises. Since 2013, 232 cases of genetic metabolic diseases have been treated at our liver transplantation center. Some of these diseases included abnormal organic acid metabolism2, urea cycle disorder and primary hyperoxaluria (PH), etc. and the surgeries performed included living donor liver transplantation, organ donation after citizen death and cross assisted liver transplantation.3, 4 PH is a rare autosomal recessive metabolic disease.5 PH leads to a deficiency in liver-specific alanine-glyoxylate aminotransferase (AGT), which then results in endogenous oxalate production, urinary excretion, and even renal dysfunction.6 Of the three types of PH, PH1 is the most common, accounting for about 80% of all PH types .1, 7 ". I migh add into introduction.