

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Clinical Cases

**Manuscript NO:** 39993

**Title:** Research Progress on Signaling Pathways in Cirrhotic Portal Hypertension

**Reviewer's code:** 02650654

**Reviewer's country:** Italy

**Science editor:** Jin-Lei Wang

**Date sent for review:** 2018-05-28

**Date reviewed:** 2018-05-28

**Review time:** 0 Hour

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input checked="" type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input checked="" type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

### SPECIFIC COMMENTS TO AUTHORS

If possible, state the clinical applications of agents lowering Portal Hypertension.

### INITIAL REVIEW OF THE MANUSCRIPT

*Google Search:*



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## PEER-REVIEW REPORT

**Name of journal:** World Journal of Clinical Cases

**Manuscript NO:** 39993

**Title:** Research Progress on Signaling Pathways in Cirrhotic Portal Hypertension

**Reviewer's code:** 02528832

**Reviewer's country:** Spain

**Science editor:** Jin-Lei Wang

**Date sent for review:** 2018-06-20

**Date reviewed:** 2018-06-25

**Review time:** 5 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input checked="" type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input checked="" type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input checked="" type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

### SPECIFIC COMMENTS TO AUTHORS

Well structured manuscript that deals with a complex issue, summarizing some recent research about some molecular alterations observed in portal hypertension. I have some minor suggestions: 1. Although many abbreviations are clarified in the text, I prefer - as the authors state- that they are ALSO written in full at the beginning of the manuscript. 2.



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Figure legends should also provide the full name of the abbreviated receptors/transcription factors depicted.<sup>3</sup> I think that English could be improved.

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## PEER-REVIEW REPORT

**Name of journal:** World Journal of Clinical Cases

**Manuscript NO:** 39993

**Title:** Research Progress on Signaling Pathways in Cirrhotic Portal Hypertension

**Reviewer's code:** 00006459

**Reviewer's country:** Australia

**Science editor:** Jin-Lei Wang

**Date sent for review:** 2018-06-20

**Date reviewed:** 2018-06-29

**Review time:** 9 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
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			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input type="checkbox"/> No

### SPECIFIC COMMENTS TO AUTHORS

This ms has good, albeit limited, content, but it is not well organised, nor is it edited for clarity. It is difficult for most readers to digest: Organising by subtopic and providing headings and subheadings will be helpful. Then reconsider the title. Is vasoconstriction pro-fibrotic? Is hypertension profibrotic? Cellulose is mentioned as a

product of HSC; what word was intended? Cellulose is a plant product. The suggestion that Nrf2/HO-1 is a target is over-stated. Many things are unclear; eg that celecoxib is a COX2 inhibitor. The figures need to have greater clarity. FIG 1 is far too complex to communicate to readers. In both figs, the cell type that each pathway is in must be clear. There must not be a mixture of intracellular pathway, pathological process and cell types all in a single diagram. For example, lines from COX2 to inflammation and angiogenesis is not helping clarity. For example, the one pathway in fig 2 cannot occur in all cell types relevant to 3 processes; fibrosis, vasodilation and angiogenesis. Figure legends should define acronyms, such as COX, used in fig. Fig 2: ADMA links to AGXT2, which is an important enzyme, but is not considered. COX2 inhibition is anti-fibrotic; this is not considered. Regarding individual signaling pathways, please add discussions on how each of these pathways may be contributing to PHT pathophysiology. Calling JAK/STAT “newly discovered” is not correct. The author contribution statement is odd; it is a review so there was no experiment. The English needs improvement. Examples include 3rd sentence of Core Tip, page 5 “It [what?] may be ...” Page 5: “promotes splitting” doesn’t make sense.

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