

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 65964

Title: Simultaneous embolization of spontaneous porto-systemic shunts and intrahepatic

arterioportal fistula: A case report

Reviewer's code: 05937294 Position: Peer Reviewer Academic degree: MD

Professional title: Doctor, Research Assistant Professor

Reviewer's Country/Territory: Iran

Author's Country/Territory: China

Manuscript submission date: 2021-03-31

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-03-31 08:14

Reviewer performed review: 2021-04-08 14:14

Review time: 8 Days and 6 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Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish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 [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [] Minor revision [Y] Major revision [] Rejection
Re-review	[Y]Yes []No
Peer-reviewer	Peer-Review: [] Anonymous [Y] Onymous
statements	Conflicts-of-Interest: [] Yes [Y] No



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SPECIFIC COMMENTS TO AUTHORS

Authors all present an interesting study that emphasized the potential fatal as well as neglected complication of chronic liver disease and also contributing factor of recurrent hepatic encephalopathy. Besides how the magnitude of these data adds new findings compare to the current standard cannot be determined based on this study. The results are encouraging and further study is warranted. here some relevant points: 1. You also emphasize the method of treatment, but there is no mention of it in the title and introduction. 2. Serum levels of ammonia alone are not enough to determine the presence of a PSS and just can be used to determine its severity. Why not use the ICG-R15 values along with serum ammonia? 3. With respect to the high complication of embolization such as damage to the lung, heart, or other areas beyond the liver by the administered compounds such as the coils, why didn't you use medications for reduction of portal inflow such as beta-blockers in addition to Isosorbide-5-mononitrate before more invasive intervention? To describe precisely, what are the future directions of intervention you recommend for gastrointestinologist in the management of similar cases? 4. I'm interested to know the long follow-up of the patient. 5. The following paper is suggested to use in general considerations: • Br J Surg. 2014 Nov;101(12):1509-17. doi: 10.1002/bjs.9619. Epub 2014 Sep 9. Systematic review of congenital and acquired portal-systemic shunts in otherwise normal livers. T J Matthews 1, M I Trochsler, F H Bridgewater, G J Maddern More minor issues that should be addressed include: 1. It seems that the verb "deviate" in the introduction, the first paragraph doesn't agree with the subject and should change to "deviates" 2. Add the article of "the" to "intestine" in the first paragraph of the introduction. 3. "the episodes" should change to "episodes" in the first paragraph of the introduction. It seems that article use may be incorrect here. 4. In the introduction, the second paragraph, "widely" used is the wrong part of speech for



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this context. Use instead "widespread" 5. In the chief complaint section of the case presentation, the preposition uses of accompany is incorrect. Use "by" instead of "with" 6. In the first paragraph of the history of present illness, it appears you have an unnecessary comma in a compound predicate after the word "ago". Consider removing it 7. The noun phrase "local hospital" in the next paragraph, seems to be missing a determiner before it. Consider adding an article and change it to "a local" or the local". 8. "hyper-reflexia" is incorrect; use instead "hyperreflexia" in the second paragraph of the history of present illness and physical examination. 9. "above" at the end of the present illness, should be accompanied by "the" 10. About the history of past illness, the aforementioned sentence contains a series of three or more words, phrases, or clauses. Consider inserting a comma to separate the elements. Therefore, insert a comma after "stroke". Moreover, need to insert a comma before "and" at the end of laboratory examination and also in the first sentence of the outcome and follow-up. 11. In the physical examination, it is unlikely that your sentence needs the article "the" before "both". Consider deleting the article 12. In the outcome and follow-up, second paragraph, the noun phrase "anticoagulant therapy" seems to be missing a determiner before it. Consider adding an article and use "an anticoagulant therapy" 13. "interval" in the last part of outcome and follow-up should change to "intervals" 14. The preposition of "through" in the last sentence of the first paragraph in discussion is incorrect here; use "by" instead. 15. "develop" doesn't agree with the subject at the beginning of the second paragraph in the discussion. Use "develops" 16. Replace the "more-frequent" with "more frequent" in the same paragraph. 17. In the discussion, the second paragraph, the indefinite article, "a", is redundant when used with the uncountable noun "survival" in your sentence. Consider removing it. 18. In the last sentence of the third paragraph of the discussion, the "instance" isn't agreed in number with other words in this phrase. Use "instances" instead. 19. The noun phrase "failure" in the same sentence is missing a



determinator before it. Consider add an article and use "the failure"



RE-REVIEW REPORT OF REVISED MANUSCRIPT

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arterioportal fistula: a case report

Reviewer's code: 05937294 Position: Peer Reviewer Academic degree: MD

Professional title: Doctor, Research Assistant Professor

Reviewer's Country/Territory: Iran

Author's Country/Territory: China

Manuscript submission date: 2021-03-31 Reviewer chosen by: Yun-Xiaojian Wu

Reviewer accepted review: 2021-06-07 13:29

Reviewer performed review: 2021-06-07 17:27

Review time: 3 Hours

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



SPECIFIC COMMENTS TO AUTHORS

The aforementioned issues have been addressed and the paper is appropriate to publish.