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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 2261

Title: Intrahepatic Endometriosis as Differential Diagnosis of Hepatic Cysts - Case Report and

Review of Literature Reviewer code: 00003558 Science editor: Gou, Su-Xin

Date sent for review: 2013-02-13 09:10

Date reviewed: 2013-02-21 06:40

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[] Grade A (Excellent)	[] Grade A: Priority Publishing	Google Search:	[] Accept
[] Grade B (Very good)	[Y] Grade B: minor language polishing	[] Existed	[] High priority for
[Y] Grade C (Good)	[] Grade C: a great deal of	[] No records	publication
[] Grade D (Fair)	language polishing	BPG Search:	[]Rejection
[] Grade E (Poor)	[] Grade D: rejected	[] Existed	[] Minor revision
		[] No records	[Y] Major revision

COMMENTS TO AUTHORS

Manuscript: Intrahepatic Endometriosis as Differential Diagnosis of Hepatic Cysts - Case Report and Review of Literature General The manuscript contains a review of case reports of patients with hepatic endometriosis. . The reader is left with the idea what is unique here, why should the Journal publish this. This question is relevant as Huang et al. (reference 10) also wrote a case report and review of literature. The authors should show a new angle, was there something special about this case relative to other case reports. The Huang review has been published some years ago (2002). I wonder if there is any new knowledge in comparison to earlier literature. Title: 1. Clear title it attracts my attention Abstract 1. I think there is too much detailed information in the abstract. My suggestion would be to shorten it. For example the place of the cyst (liver segments IV, V, VIII) is not so important that it needs to be mentioned in the abstract. 2. The end of the abstract concludes with a remark that pericystectomy should be performed, when? Under what circumstances?. Is this the only treatment option? Or is liver resection also still a treatment nowadays? What about recurrence rate? May be the authors should mention something about the treatment options in the text and/or even add the given treatments of patients in the other case reports to table 1. 3. In the immunostaining an ... is German-English, please rephrase Core Tip 1. I think this paragraph provides us with several good arguments why this issue is interesting. I am left with the question why this case report and review is unique in comparison to the other 17 case reports. Introduction 1. The reference provided for prevalence of endometriosis in the first sentence is probably incorrect. Reference no. 1 does not describe any prevalence numbers. 2. Even if there were prevalence numbers in this first reference I would think there are more up to date epidemiological data about



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endometriosis, the article is from 1997. My advice would be to search for an accurate & up to date number, may be the prevalence has changed over the years? 3. The authors give the prevalence in women of reproductive age, however you write that 6 of 17 patients were postmenopausal. Are the authors to give us some data on prevalence of endometriosis in postmenopausal women as well? 4. I am not sure if starting the introduction with the importance of endometriosis is a logical start in a Journal with a GI focus. In my opinion it would be better to start with the definition of endometriosis and then write something about the fact that intrahepatic endometriosis is a rare form Case Report 1. I would suggest to rewrite the first sentence because it should be formulated differently. Typographical error 1st line: "thirty-two year old" should be "A thirty-two year old" and if you read the sentence it feels like it is unfinished. 2. Typographical error 7th line: "ERPC" should be "ERCP" 3. Please mention Endoscopic Retrograde Cholangio Pancreaticography prior to the abbreviation (ERCP) the first time. 4. 13th line: 'We could detect no further abnormalities during the operation", my suggestion would be to write "We could not detect any other abnormalities during the operation" or "During the operation no other abnormalities were detected" 5. 18th line: I would suggest to combine the last two sentences. For example: "origin of the cyst and so the diagnosis of an intrahepatic endometriosis was confirmed" 6. Tumor markers are normal. What about CA 125? Did you measure it? Literature about endometriosis mentions that it is often high although it is not a sensitive indicator of endometriosis. Discussion 1. The authors start discussion with the difficulty of diagnosing hepatic endometriosis. I think it is worth mentioning which other diagnosis had been considered in this context (differential diagnosis). 2. I think both theo



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Title: Intrahepatic Endometriosis as Differential Diagnosis of Hepatic Cysts - Case Report and

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Reviewer code: 00057100

Science editor: Gou, Su-Xin

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CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[Y] Grade A (Excellent)	[Y] Grade A: Priority Publishing	Google Search:	[Y] Accept
[] Grade B (Very good)	[] Grade B: minor language polishing	[] Existed	[] High priority for
[] Grade C (Good)	[] Grade C: a great deal of	[] No records	publication
[] Grade D (Fair)	language polishing	BPG Search:	[]Rejection
[] Grade E (Poor)	[] Grade D: rejected	[] Existed	[] Minor revision
		[] No records	[] Major revision

COMMENTS TO AUTHORS

Dear Editor: I have read with interest the manuscript entitled "Intrahepatic Endometriosis as Differential Diagnosis of Hepatic Cysts - Case Report and Review of Literature". It is a very interesting manuscript for the readers of WJG. It can be accepted for publication after minor review. Minor problems: Is there any explanation for the lack of sample during two laparoscopic de-roofing surgery? Can the MRI characteristic of the cyst be better described? Is there any differential diagnosis in the MRI image with other hepatic tumor and cyst? For example: early vs late peripheral nodular enhancement? Early arterial enhancement with rapid loss of enhancement and return to isointensity with the surrounding liver? Is the rapid loss of enhancement in the portal venous phase? Delayed fill-in the center? In the Table 1 Inal M case no operation should be changed to no.



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Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 2261

Title: Intrahepatic Endometriosis as Differential Diagnosis of Hepatic Cysts - Case Report and

Review of Literature Reviewer code: 01350278 Science editor: Gou, Su-Xin

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CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[] Grade A (Excellent)	[Y] Grade A: Priority Publishing	Google Search:	[Y] Accept
[] Grade B (Very good)	[] Grade B: minor language polishing	[] Existed	[] High priority for
[Y] Grade C (Good)	[] Grade C: a great deal of	[] No records	publication
[] Grade D (Fair)	language polishing	BPG Search:	[]Rejection
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COMMENTS TO AUTHORS

Major points to be taken: 1. There seemed to be more than 17 English publications currently online reporting clinical cases toward hepatic endometriosis, e.g.; Ferdico Roesch-Dietlen et al., Hepatic Endometriosis, Annals of Hepatology, July-September, Vol. 10 No. 3, 2011: 347-348. Reid GD et al., Hepatic endometriosis: A case report and review of the literature, Australian and New Zealand Journal of Obstetrics and Gynaecology, February 2003, Vol. 43, Issue 1, 87-89 Nezhat C et al., Laparoscopic management of hepatic endometriosis: Report of two cases and review of the literature, The Journal of Minimally Invasive Gynecology, June 2005, Vol 12, Issue 3, Pages 196-200 2. As the author mentioned only one of the publication presented with cyclical pain in the upper right abdominal quadrant accompanying menstruation, this is not so certain – as Ferdico RD's finding also shown this. 3. The positive result of the combination staining of CK7, progesterone and estrogen can also mean the presence of endometroid tumors, not just for defining epithelial cells only (ref: Zhao C et al., Am J Surg Pathol. 2007 Feb;31(2):255-66.) Minor correction needed: 1. In Table 1: Please add et al. followed by the author's name. 2. In Table 1: Misspelling of an author's surname to cause anonymity: should be Finkel L not Finke L.