

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 4671

Title: Up-to-seven criteria for hepatocellular carcinoma liver transplantation: a single center analysis

Reviewer code: 00053888

Science editor: Gou, Su-Xin

Date sent for review: 2013-07-16 10:52

Date reviewed: 2013-07-17 21:10

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

This is an interesting study comparing liver transplant outcomes in 3 groups of patients with different stage of HCC. The study as the authors suggests, suffers from being retrospective and also comparing a radiological system of selection with a histological evaluation of the explanted liver. However the study will add to the published literature, it would be unusual anywhere else to have a cohort of patients with such advanced HCC undergoing transplantation.

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 4671

Title: Up-to-seven criteria for hepatocellular carcinoma liver transplantation: a single center analysis

Reviewer code: 00004882

Science editor: Gou, Su-Xin

Date sent for review: 2013-07-16 10:52

Date reviewed: 2013-07-22 08:28

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input checked="" type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> Existed	<input checked="" type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

This paper describes the utility of Up-to-seven criteria for HCC Liver transplantation. Although the paper is well written and interesting, it includes a problem as described below. 1) In this paper, the patients are divided into 3 groups. However, Group 1 is included in Group 2. It may be not adequate to compare Group 1 with Group 2. Group 2 should include patients who are beyond Milan criteria and within Up-to-seven criteria (n=32). This comparison will make the importance of the paper more clear.

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 4671

Title: Up-to-seven criteria for hepatocellular carcinoma liver transplantation: a single center analysis

Reviewer code: 00071700

Science editor: Gou, Su-Xin

Date sent for review: 2013-07-16 10:52

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CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

I want to summarize this topic. Hepatocellular carcinoma is a major health problem worldwide. This disease is especially problematic for Asian countries, which have a high prevalence of HBV and HCV infection. Effective management of early Hepatocellular carcinoma includes resection, radiofrequency ablation and liver transplantation. Liver transplantation remains the best treatment for small Hepatocellular carcinoma resulting from end stage liver disease. However, post-operative recurrence is still a major problem related to Hepatocellular carcinoma after Liver transplantation. Stringent inclusion criteria have been adopted to ensure tumor free survival after Liver transplantation. The Milan criteria have been used as the standard selection criteria for Hepatocellular carcinoma Liver transplantation all over the world. Several groups argued the Milan criteria were too strict and excluded some Hepatocellular carcinoma patients from Liver transplantation, despite the possibility of benefit, and that the criteria should be expanded. Therefore, the Milan group attempted to expand the Milan criteria and create a new set called the up-to-seven criteria (new Milan criteria). Object of that study is the lack of data on this topic in China. Except the number of living donor transplant study groups similar characteristics between the two groups. Characteristics of the tumor size and the number of group 1 and 2 no significant difference. However, there are significant differences between the other groups. As a result, No significant difference in AFP. As expected, lower than the observed survival time and increased tumor recurrence. Although the up-to-seven criteria have been analyzed all over the world, they have not been as widely accepted as the Milan criteria, even 4 years after their conception. Meanwhile, there is still no research on these criteria in China, where most HBC infections. Therefore, this study is important.