

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 3562

Title: Clinical effects and complications of TIPS for portal hypertension due to cirrhosis

Reviewer code: 00503571

Science editor: Zhai, Huan-Huan

Date sent for review: 2013-05-07 09:50

Date reviewed: 2013-05-11 20:49

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input 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)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

Authors of the manuscript describe their large experience (two hundred and eighty patients) of TIPS placemen in patients with portal hypertension due to cirrhosis. Authors note that the particularity of studied population was the limited access to possibility for liver transplantation in area. Another particularity of the study was hepatitis B as a reason of cirrhosis in the majority of the patients. Remarks: 1) The clinical characteristics of the study cohort might to be described more precise. Patients Child-Pugh score, MELD score and the indication for TIPS (bleeding or refractory ascites) are necessary to indicate in results section. 2) Patients were followed-up after TIPS. The cumulative survival rate was 86% in 12 months, 81% in 24 months, 75% in 36 months, 57% in 48 months and 45% in 60 months. However, the reasons of patient's death were not determined. Authors do not analyse important factors influencing on survival (Child-Pugh score, MELD score, and the indication for TIPS -bleeding or refractory ascites). Influence of Child-Pugh score was partially analyzed in Discussion section, however, these important for prognosis data need to be presented in Fig 4 and Results section. 3) English language and stile need to be improved.

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 3562

Title: Clinical effects and complications of TIPS for portal hypertension due to cirrhosis

Reviewer code: 00009225

Science editor: Zhai, Huan-Huan

Date sent for review: 2013-05-07 09:50

Date reviewed: 2013-05-12 12:55

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 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 checked="" 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

need to have a risk stratification for tips and survival (low, medium and high 1 year survival) for 280 patients please have the baseline MELD score, and sodium, creatinin, bilirubin, cp score, age need english revision

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 3562

Title: Clinical effects and complications of TIPS for portal hypertension due to cirrhosis

Reviewer code: 00012156

Science editor: Zhai, Huan-Huan

Date sent for review: 2013-05-07 09:50

Date reviewed: 2013-05-13 09:50

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input checked="" 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

In this paper, Jianping et al., described the effectiveness of the transjugular intrahepatic portosystemic shunt (TIPS) for 280 patients with portal hypertension due to cirrhosis. Number of the patients were large and the effects of TIPS for the patients with portal hypertension due to cirrhosis were defined. But description was not elaborated and contents of materials, results and discussion still confused. Especially discussion was so long and it contained methods and results. Therefore, contents of this paper should be put in order and be polished. Minor comments; 1. Miss spellings were observed. 2. Discussion contains the data which were already described in the results section. 3. On the other hands, there were no data with which authors made some discussion. Authors should described these data in this paper, for example, survival rate and death rate. 4. The precise information of the stent was necessary. 5. The horizontal label of every Figure was better to describe 12, 24, 36 months, instead of 10, 20, 30. 6. Authors had better to make some discussion about the age. 7. Discussion about the ascites was difficult to understand. 8. Authors had better to describe the pathological findings and discussion. 9. There was no figure legends.

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 3562

Title: Clinical effects and complications of TIPS for portal hypertension due to cirrhosis

Reviewer code: 01407353

Science editor: Zhai, Huan-Huan

Date sent for review: 2013-05-07 09:50

Date reviewed: 2013-05-14 20:43

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input 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 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

Major comments 1) The study by Jianping et al reports a single centre experience of a large series of cirrhotic patients who had undergone TIPS for different complications of portal hypertension. It should be stressed in the title, as follows: "...due to cirrhosis: a single centre experience". 2) Is it a prospective study or a retrospective evaluation? It should be clearly stated both in the 'Methods' and in the 'Abstract'. 3) The 'Clinical data' paragraph should be the first one of the 'Results' section, eventually creating a Table with epidemiological and biochemical data of the study population, the etiologies of liver disease and the different indications to TIPS (numbers and percentages of patients). Conversely, a 'Patients' section, before 'Methods', should clearly state inclusion criteria (is it a retrospective evaluation of all consecutive patients undergoing TIPS in this centre between 2005 and 2009?), and exclusion criteria (in the case it was a retrospective evaluation, those that were considered exclusion criteria for TIPS in that centre for the specified period; in the case it was a prospective study, those that were assumed as exclusion criteria per protocol); 4) The type of stent used should be specified in the 'Methods' section rather than in the 'Discussion' one. Moreover, in the same section, also the protocol of anticoagulation should be reported (type, beginning and end of anticoagulation). 5) In the 'Results' section, it could be useful to precise the precise number of deaths in the short term (1 month): number of patients and causes of death. 6) It should also be useful to compare indications to TIPS, epidemiological factors (age, sex), basal liver biochemistry and Child-Pugh scores between patients developing liver failure and those not, and between patients developing hepatic encephalopathy and those not, in order to determine if there are predictors of these 2 possibly preventable complications in this series. Minor comments 1) Spelling and grammar should be completely revised with the help of a native English speaker.