

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 6113

Title: Myofibroblastic cell activation and neovascularization predict native liver survival and development of esophageal varices in biliary atresia

Reviewer code: 02462702

Science editor: Qi, Yuan

Date sent for review: 2013-10-03 21:01

Date reviewed: 2013-10-20 23:36

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input checked="" type="checkbox"/> Grade A (Excellent)	<input checked="" 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 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 was a very nicely performed study. The manuscript was well written. The small sample size was understandable in view of the relatively uncommon condition.

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<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

The author examined liver tissue of biliary ectasia (BA) infants at the time of Kasai portoenterostomy (PE). They found that degree of myofibroblastic cell activation could be a predictive factor for transplant-free survival and that of CD34-positive neovascularization for incidence of esophageal varices. They have prepared quite large number of patients for their retrospective study regarding the incidence of BA. The results seem quite reasonable, especially the positive relationship between hepatic neovascularization and incidence of esophageal varices is novel although the relationship between liver fibrogenesis and clinical outcome of PE has already widely known as well as that between age performed PE and liver fibrogenesis. The reviewer has several questions as listed below.

1. As mentioned above, the novel point of this work is that the authors have revealed that the degree of hepatic neovascularization at the time of PE can predict the incidence of esophageal varices at age
2. My question is whether hepatic neovascularization degree is dependent on the age on PE or not. The authors are advised to analyze the correlation between age and neovascularization degree.
2. The reviewer is also interested whether liver fibrogenesis and neovascularization degree correlates with BA type (1, 2, or 3a). The authors are advised to exhibit the detail of BA type as well as other patient parameters including liver enzymes in a table, and analyze relationship between BA type and fibrogenesis/ neovascularization.