

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 7099

Title: Anatomic liver resection of segment 6, 7 and 8 is an alternative modality for maximal hepatectomy in the treatment of hepatocellular carcinoma

Reviewer code: 00068443

Science editor: Gou, Su-Xin

Date sent for review: 2013-11-04 15:06

Date reviewed: 2013-11-06 18:53

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 type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input checked="" type="checkbox"/> Grade D (Fair)	language polishing	BPG Search:	<input checked="" type="checkbox"/> Rejection
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Minor revision
		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

Multiple segments resection is frequent for liver cancer patients. the Manuscript contains accumulated information that has been previously published with only a few technical improvements, and only six patients were included in this study.

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Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 7099

Title: Anatomic liver resection of segment 6, 7 and 8 is an alternative modality for maximal hepatectomy in the treatment of hepatocellular carcinoma

Reviewer code: 00058210

Science editor: Gou, Su-Xin

Date sent for review: 2013-11-04 15:06

Date reviewed: 2013-11-26 22:18

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 checked="" 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 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)		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

Surgical technique of parenchyma-sparing liver resection for right liver HCC (large or multiple) developed on liver cirrhosis. Alternative to right hepatectomy preceded by portal vein embolisation or TCAE. This is a description of an atypical resection based on anatomy and not an anatomical resection : indeed, for HCC anatomical resection is based on the portal area (in this technique it remains the segment V). A complete reorganization of the text in the materials and methods and results paragraph is mandatory (population, tumor, liver function, volume), surgical procedure, and short term follow up and pathological reports (margins). Long term results and management of recurrence : it is not necessary to detail them in a technical note Table 1 clear (at the opposite of the text). Figures are very clear. English must be revised Major revisions.

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Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 7099

Title: Anatomic liver resection of segment 6, 7 and 8 is an alternative modality for maximal hepatectomy in the treatment of hepatocellular carcinoma

Reviewer code: 01560498

Science editor: Gou, Su-Xin

Date sent for review: 2013-11-04 15:06

Date reviewed: 2013-12-05 07:26

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 checked="" 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 type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	language polishing	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

To author Partial hepatectomy is powerful tool for HCC patients. Selective resection of right anterior/posterior segment often required an experienced surgeon. Though case number is small, Jia, et al reported anatomical liver resection for Segments 6, 7 and 8. Their procedures may involve an unique technique.