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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 5864

Title: Nuclear Imaging for Functional Evaluation and Theragnosis in Liver Malignancy and Transplantation

Reviewer code: 00054102

Science editor: Gou, Su-Xin

Date sent for review: 2013-09-29 14:20

Date reviewed: 2013-10-07 13:51

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)		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

This is an extensive and accurate review. It is well structured and it is very interesting. It includes nearly all information on the issue. My only comment is that it is centered on radiological point of view. I have no major comment. I only suggest to the authors some more especific comment on the real clinical application of each technique. Comments to the authors: - Could you specify the real clinical application of each technique. For example, when do you suggest to perform PET when evaluating a patient with colorectal liver metastasis? Always? Only when extrahepatic disease is suspected....? - In the same sense, When do you suggest to perform PET before LT for hepatocellular carcinoma? Is it useful to assess vascular invasion? And similarly in all clinical settings.



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Date reviewed: 2013-10-08 01:32

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<input type="checkbox"/> Grade A (Excellent)	<input checked="" 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 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

This is a comprehensive review of the present state of nuclear imaging as it can be used in liver malignancy and transplantation. As the scope of this review is clinical practice, it seems desirable to also address the prerequisites of these methods (f.i. availability of nucleotides, preparation on site, necessity of cyclotron on site and the costs). Can these methods be offered countrywide or how many centers are needed to cover the needs of the population in question? On page 5 the biological decay (renal excretory system, etc.) of FDG is mentioned and should be referenced, on page 6 three studies (RefNr.10,12,13) are cited and then a statement follows, that in one of these studies detection rates are specified, but a reference is lacking to indicate which one of these 3 studies is meant.