

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 5873

Title: Interventional Radiology in Living Donor Liver Transplant

Reviewer code: 00039570

Science editor: Gou, Su-Xin

Date sent for review: 2013-09-29 14:45

Date reviewed: 2013-10-21 16:20

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)	<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 checked="" type="checkbox"/> Major revision

COMMENTS TO AUTHORS

There should be emphasis on how interventions are different in living vs cadaveric donors .Most of the data are from literature on cadaveric donors . So the title is some how misleading . Possible rule of interventions for complications in donors are not discussed at all.

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 5873

Title: Interventional Radiology in Living Donor Liver Transplant

Reviewer code: 00039387

Science editor: Gou, Su-Xin

Date sent for review: 2013-09-29 14:45

Date reviewed: 2013-10-21 23:18

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 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"/> Rejection
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input checked="" type="checkbox"/> Minor revision
		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

This is a report on an experience of non surgical procedures performed in order to treat complications in recipients of living related liver transplantation. I would suggest to report in the background and in the references, recent work on this area published in the WJG such as: 1)103. Interventional radiology procedures in adult patients who underwent liver transplantation." Roberto Miraglia, Luigi Maruzzelli, Settimo Caruso, Mariapina Milazzo, Gianluca Marrone, Giuseppe Mamone, Vincenzo Carollo, Salvatore Gruttadauria, Angelo Luca, Bruno Gridelli. Salvatore Gruttadauria, MD, Associate Professor, Series Editor World J Gastroenterol 2009 February 14; 15(6):684-693 PMID:19222091 2) Right hepatic lobe living donation: A 12 years single Italian center experience. Salvatore Gruttadauria, Duilio Pagano, Davide Cintonio, Antonio Arcadipane, Mario Traina, Riccardo Volpes, Angelo Luca, Giovanni Vizzini, Bruno Gridelli, Marco Spada. World J Gastroenterol 2013 October 14; 19(38): pag. 6353-6359 ISSN 1007-9327 (print) ISSN 2219-2840 (online) doi:10.3748/wjg.v19.i38.6353

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 5873

Title: Interventional Radiology in Living Donor Liver Transplant

Reviewer code: 00004882

Science editor: Gou, Su-Xin

Date sent for review: 2013-09-29 14:45

Date reviewed: 2013-10-22 18:14

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	<input type="checkbox"/> Existed	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input checked="" type="checkbox"/> Major revision

COMMENTS TO AUTHORS

This paper describes interventional treatments for postoperative complications of the hepatic artery, portal vein and bile duct after living donor liver transplantation. Although the paper is well written, it includes several problems as described below. 1) On hepatic artery stenosis and portal vein stenosis, more concrete description of treatment techniques should be described. 2) On hepatic artery stenosis, portal vein stenosis, hepatic vein stenosis and bile duct stenosis, the success rates of interventional treatment and surgical treatment should be added and discussed with long-term results.