

8226 Regency Drive, Pleasanton, CA 94588, United States Telephone: +1-925-223-8242 Fax: +1-925-223-8243 E-mail: bpgoffice@wjgnet.com http://www.wjgnet.com

ESPS Peer-review Report Name of Journal: World Journal of Gastroenterology ESPS Manuscript NO: 6473 Title: Postoperative biliary complications following orthotopic liver transplantation: assessment with MR Cholangiography Reviewer code: 02447059 Science editor: Ling-Ling Wen Date sent for review: 2013-10-22 13:56 Date reviewed: 2013-11-02 18:21

LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[ ] Grade A: Priority Publishing	Google Search:	[ ] Accept
[Y] Grade B: minor language polishing	[ ] Existed	[ ] High priority for
[ ] Grade C: a great deal of	[ ] No records	publication
language polishing	BPG Search:	[ ]Rejection
[ ] Grade D: rejected	[ ] Existed	[Y] Minor revision
	[ ] No records	[ ] Major revision
	<ul> <li>[ ] Grade A: Priority Publishing</li> <li>[ Y] Grade B: minor language polishing</li> <li>[ ] Grade C: a great deal of language polishing</li> </ul>	[ ] Grade A: Priority PublishingGoogle Search:[ Y] Grade B: minor language polishing[ ] Existed[ ] Grade C: a great deal of[ ] No recordslanguage polishingBPG Search:[ ] Grade D: rejected[ ] Existed

### COMMENTS TO AUTHORS

The authors are presenting a review concerning the utility of MRC in assessing post liver transplantation biliary complication. They demonstrate its safety, accuracy specially when enhanced with contrast agent in selected cases. In general: the review is well written and the information provided is of great value in the field. Though it suits more Radiology journals, yet, the issue is important for WJG readers. Comments Abstract: 1. Mention the overall sensitivity and specificity of MRC 2. Some abbreviations are not preceded by the full name; eg. ERCP and PTC 3. Sometimes the author writes "non-invasive" and others "noninvasive". Please unify 4. "Orthotopic liver transplantation" in abstract is the first mention, so it need to be followed by its abbreviation "OLT" Introduction: 1. "Autoimmune chronic hepatitis": this term is relatively old, the disease is chronic by nature and the commonly used term is "autoimmune hepatitis" 2. Although the abbreviation OLT is used in the first line of introduction, the author is still using the full name many times throughout the manuscript. Please revise 3. Page 5, 2nd paragraph after reference 5; better be a full stop then a start of new sentence 4. Many paragraphs are lacking a reference. Such as, page 6, 2nd paragraph, page 8, 1st paragraph 5. Sometimes the author writes "ultrasound" and others "ultrasonography". Please unify 6. The first mention of ultrasound in page 6 is not followed by the abbreviation which is used thereafter in page 11 7. Page 7, 2nd paragraph; ERC is used while it is ERCP in abstract 8. Page 8, 1st paragraph, the author used the abbreviation 3D in line 2, then used the full name in the same paragraph in line 6, page 9, line 11, and page 12, 2nd paragraph 9. Page 8, 1st paragraph, line 7, the author used T2w while in the remaining text, "T2 weighted" is the used form 10. Page 8, last



8226 Regency Drive, Pleasanton, CA 94588, United States Telephone: +1-925-223-8242 Fax: +1-925-223-8243 E-mail: bpgoffice@wjgnet.com http://www.wjgnet.com

paragraph, the author used the abbreviation MRC, while MRCP is the used one earlier in the same page 11. Page 10, line 2 from below, the author wrote the full name of CC although the abbreviation was used earlier, similarly in page 12, 2nd paragraph and page 15 line 6 12. Page 11, line 4; CT abbreviation is not preceded by its full name 13. The author sometimes use biiary-enteric and others use biliary-jejunal, is there a difference? 14. Page 13, line 5, "MR cholangiography" in line 5 and line 11, and page 16, line 5, should be MRC References list 1. Reference 5, DOI format seems weird, is it correct? Figure legends 1. MIP is used without being preceded by the full name 2. Figure 5 legend; the author sometimes use "stones" and others use "calculi". What is the difference? 3. The author used pointing by arrows in few photographs, I think it is important for non-radiology professionals, to use arrows in all the photos to indicate exactly the site referred to or described in the text. 4. The author sometimes uses two photos "right and left panel" (Fig 3B, 5C, 5D and 5F) and referred to by one letter. The author needs to describe the difference between the right and the left. If they are the same, so one panel is enough 5. Figure 7 legend; "the site of biliary-enteric anastomosis" is not clear in the photo, please point with arrow Photographs 1. What is the source of the used photographs? Is it owned by the author or reproduced from other source? Please indicate



8226 Regency Drive, Pleasanton, CA 94588, United StatesTelephone: +1-925-223-8242E-mail: bpgoffice@wjgnet.comhttp://www.wjgnet.com

ESPS Peer-review Report Name of Journal: World Journal of Gastroenterology ESPS Manuscript NO: 6473 Title: Postoperative biliary complications following orthotopic liver transplantation: assessment with MR Cholangiography Reviewer code: 02438890 Science editor: Ling-Ling Wen Date sent for review: 2013-10-22 13:56 Date reviewed: 2013-12-30 03:20

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[ ] Grade A (Excellent)	[Y] Grade A: Priority Publishing	Google Search:	[ ] Accept
[ ] Grade B (Very good)	[ ] Grade B: minor language polishing	[ ] Existed	[ ] High priority for
[Y] Grade C (Good)	[ ] Grade C: a great deal of	[ ] No records	publication
[ ] Grade D (Fair)	language polishing	BPG Search:	[Y]Rejection
[ ] Grade E (Poor)	[ ] Grade D: rejected	[ ] Existed	[ ] Minor revision
		[ ] No records	[ ] Major revision

### COMMENTS TO AUTHORS

The authors or the the manuscript entitled "Postoperative biliary complications following orthotopic liver transplantation: assessment with MR Cholangiography" discussed the MRCP findings of liver transplantation complications in detail. This is an excellent review with vey demonstrative radiologic images. On the other hand I think that the content of this work may not very appropriate for the readers of "World Journal of Gastroenterology". It seems to me that a radiology or a transplantion journal may be better for this review to be published. In this review the general information given in the introduction is below the expectation of a gastroenterologist or a surgeon but the detailed radiological inormation and technical notes are more that they usually require. Although this work is very valuable,I feel that WJG is not the optimal journal for submission. If the editor of the WJG thinks that this review is in the scope of WJG I have no reservation for the publication.



8226 Regency Drive, Pleasanton, CA 94588, United States Telephone: +1-925-223-8242 Fax: +1-925-223-8243 E-mail: bpgoffice@wjgnet.com http://www.wjgnet.com

ESPS Peer-review Report Name of Journal: World Journal of Gastroenterology ESPS Manuscript NO: 6473 Title: Postoperative biliary complications following orthotopic liver transplantation: assessment with MR Cholangiography Reviewer code: 02731744 Science editor: Ling-Ling Wen Date sent for review: 2013-10-22 13:56 Date reviewed: 2013-12-31 11:06

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[ ] Grade A (Excellent)	[ ] Grade A: Priority Publishing	Google Search:	[ ] Accept
[ ] Grade B (Very good)	[Y] Grade B: minor language polishing	[ ] Existed	[ ] High priority for
[Y] Grade C (Good)	[ ] Grade C: a great deal of	[ ] No records	publication
[ ] Grade D (Fair)	language polishing	BPG Search:	[ ]Rejection
[ ] Grade E (Poor)	[ ] Grade D: rejected	[ ] Existed	[ ] Minor revision
		[ ] No records	[Y] Major revision

### COMMENTS TO AUTHORS

This review is mainly treatments of postoperative biliary adverse events following orthotopic liver transplantation, and relatively well-written. The current discussion already has many of review of these adverse events, however, authors should describe several points. Therefore, I would recommend some revision before publication. 1. Recently, term of `complication` is not recommended. I think `adverse events` is better. Please consider this. 2. Please add the adverse events of ERC in `Diagnosis of biliary complications after OLT` section, and why difficult in patients with bilioenteric anastomoses. 3. Recently, biliary drainage for patients with surgical anatomy is performed using EUS-guided biliary drainage. However, this novel approach has still some problems, and not first-line treatment. Please also add this technique. 4. I think MDCT for biliary adverse events have also clinical impact because MDCT is more clearly detect biliary tree, and MRI is needed to more scanning time compared with MDCT. In addition, DIC-CT has more clinical benefit. Please discuss. 5. If biliary stones, sludge, and casts are not detected on MRI, it is not enough to say that these are not truly absence. Small biliary stones are sometimes detected only using EUS. Please discuss in 'Biliary stones, slude, and casts' section. 6. This paper is assessment with MRC for biliary adverse events, and relatively well-written. However, several treatment for biliary adverse events are needed because `review paper`. Please mention several treatment method in each sections.