

## ESPS PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**ESPS manuscript NO:** 15634

**Title:** Transarterial Radioembolization for Hepatocellular Carcinoma: an update and perspectives

**Reviewer's code:** 02992416

**Reviewer's country:** China

**Science editor:** Jing Yu

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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"/> The same title	<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"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input type="checkbox"/> No	

## COMMENTS TO AUTHORS

In this review, Sacco R et al provide an overview of trans-arterial radioembolization, a new therapeutic option for patients with hepatocellular carcinoma. Trans-arterial radioembolization, also known simply as radioembolization consists in the selective intra-arterial administration of microspheres loaded with Yttrium, through a percutaneous access and exerts its therapeutic effect through the radiation carried by these microspheres. Because it has only recently entered clinical practice and supported by scant results from phase III clinical trials, guidelines for its usage in practice are eagerly awaited. This review meets the need just in time and states accurately and clearly. The authors present 1) the practical aspects of the technique including patient selection, dose calculation, injection of microspheres and management of complications; 2) available data on disease control, with reference to patients in early, intermediate and advanced stages of disease; 3) advantage and disadvantage of radioembolization in practice in either early or advanced stages of patients compared to TACE in the aspect of overall survival, safety profile, extension of disease, adverse effects and procedural costs; 4) different criteria to evaluate the outcomes of radioembolization.



## BAISHIDENG PUBLISHING GROUP INC

8226 Regency Drive, Pleasanton, CA 94588, USA

Telephone: +1-925-223-8242

Fax: +1-925-223-8243

E-mail: [bpgoffice@wjgnet.com](mailto:bpgoffice@wjgnet.com)

<http://www.wjgnet.com>

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However, there are some mini details worth being addressed to improve the quality of the manuscript: 1. In the description of Methods, more references are needed to support the criteria. 2. It is recognized that treatment planning based on proper dosimeter is of vital importance for the optimization of the results of radioembolization. More information about individualized treatment planning, such as dose calculation, need to be explained in this review. 3. In the seventh line on page 9, after the number "11", I think there is a word missing.