

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 15043

Title: Reactive lymphoid hyperplasia of the liver: perinodular enhancement in the arterial dominant phase on contrast-enhanced CT and MRI

Reviewer's code: 02860712

Reviewer's country: Italy

Science editor: Yuan Qi

Date sent for review: 2014-11-09 19:47

Date reviewed: 2014-11-15 20:12

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	PubMed 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

I report herein my remarks on this paper: **ABSTRACT:** the Authors state that the pre-operative diagnosis was hepatocellular carcinoma and, at the same time, affirm that "CT and MRI enabled the correct diagnosis of the nodule". The latter sentence is misleading. Clearly, the diagnosis was histological. Radiological diagnosis was re-interpreted taking into account the histological findings. **DISCUSSION:** The Authors do not refer to the recent review on reactive lymphoid hyperplasia: Cheng-Ta Yang et al "Pseudolymphoma of the liver: report of a case and review of the literature" Asian Journal of Surgery 2013. According to this paper, CT and MRI failed to diagnose RLH in 31 of 34 cases. This issue should be properly discussed.

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Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 15043

Title: Reactive lymphoid hyperplasia of the liver: perinodular enhancement in the arterial dominant phase on contrast-enhanced CT and MRI

Reviewer's code: 02733636

Reviewer's country: Turkey

Science editor: Yuan Qi

Date sent for review: 2014-11-09 19:47

Date reviewed: 2014-11-24 06:21

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	PubMed Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<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"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		BPG Search:	<input checked="" type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

Dear Editor, In this manuscript entitled "Reactive lymphoid hyperplasia of the liver: perinodular enhancement in the arterial dominant phase on contrast-enhanced CT and MRI" the authors reported a rare case of reactive lymphoid hyperplasia of the liver. This case report describes a rare but important manifestation which should be included in the differential diagnosis of solid liver masses, although it is very rare. Although there are case reports and series in the literature, I may suggest for this report to be published because of educational purposes. However, there are several issues which should be elucidated. 1. The patient who was described in the paper did not have any risk factors for the development of hepatocellular carcinoma (HCC). Although it was not described in the case presentation, I can understand from the discussion that the patient did not have chronic hepatitis. Therefore, I wonder why the authors suspected a HCC, instead of a metastatic lesion. In the absence of any risk factors for HCC, why the authors did not investigate possible primary extra-hepatic malignancies (i.e. colorectal cancer, breast cancer etc.). Most importantly, why didn't they perform a US guided liver biopsy before deciding a major surgical procedure of hepatic resection? 2. The



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authors should discuss about the immunohistochemistry of RLH of the liver. 3. "The liver nodule showed the characteristic imaging feature of perinodular enhancement in the arterial dominant phase on contrast-enhanced CT and MRI, which enabled the correct diagnosis of the nodule." This statement is not compatible with the course of the present case. First, CT or MRI did not enable a correct diagnosis in this particular case. Also, the authors should not define "perinodular enhancement" as a characteristic feature of RLH of the liver. Because this feature can be seen in other liver masses. Yours sincerely

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 15043

Title: Reactive lymphoid hyperplasia of the liver: perinodular enhancement in the arterial dominant phase on contrast-enhanced CT and MRI

Reviewer's code: 02860897

Reviewer's country: Japan

Science editor: Yuan Qi

Date sent for review: 2014-11-09 19:47

Date reviewed: 2014-11-20 17:22

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	PubMed Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<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"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		BPG Search:	<input checked="" type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

Reactive lymphoid hyperplasia is commonly seen in elderly person. RLH in liver is rare. This report should be a valuable one, however, the description of patient's history and immunohistological analysis is too simple. Major comments 1. Reactive lymphoid hyperplasia is the benign and reversible enlargement of lymphoid tissue secondary to antigen stimuli. Does the patient have the history of autoimmune disorder, persistent viral infection including HIV and inflammatory bowel disease? 2. Please scrutinize surface markers and rearrangement of immunoglobulin.