

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 17085

Title: Efficacy of hepatic resection versus transarterial Chemoembolization for solitary huge hepatocellular carcinoma: a propensity score analysis

Reviewer's code: 00052607

Reviewer's country: Japan

Science editor: Ya-Juan Ma

Date sent for review: 2015-02-11 16:23

Date reviewed: 2015-02-22 21:40

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

This article includes important data. However, there are several points to be revised. 1. In the method section, there should be original indications for HR and TACE. Also, there is difference of follow up periods before PSM between HR and TACE. Is there histological difference of indications? It should be clarified. 2. The background features of tumors, histological differentiation and macroscopic type (single nodule without capsule invasion, with invasion, extracapsular growth etc), should be added in tables and matching. 3. Treatments after tumor recurrence should be mentioned. 4. Method (used software) of PSM should be mentioned.

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Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 17085

Title: Efficacy of hepatic resection versus transarterial Chemoembolization for solitary huge hepatocellular carcinoma: a propensity score analysis

Reviewer's code: 00032933

Reviewer's country: Taiwan

Science editor: Ya-Juan Ma

Date sent for review: 2015-02-11 16:23

Date reviewed: 2015-02-14 07:42

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 checked="" 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"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input checked="" type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
	<input type="checkbox"/> Grade D: Rejected	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

The PIs collected a consecutive series of 247 huge HCCs. Among them 67 HCCs received TACE and the other 180 HCCs received hepatic resection (HR). Sixty-one pairs of matched patients were selected from each treatment arm by conducting propensity score matching. They found that survival rate was better in the HR group than in the TACE group. Critiques: 1. In the method section, there are indications for HR, what is the indication for TACE? Why only 27% patients received TACE? 2. It is acceptable that HR is better than TACE in huge HCC. However, did PI try to do complete TACE for each case? Please indicate number of TACEs in the TACE group. 3. The TACE group had a higher mortality than the HR group. Why the total follow up period before PSM was significantly longer in the TACE (33.4 months) than in the HR group (17.1 months). Please also indicate the follow up period after PSM. 4. Please give a new figure and a description for tumor recurrence in the HR group. 5. How many patients in the HR group received TACE, RT or other therapy after tumor recurrence? 6. The discussion is redundant with poor English grammar. Please focus on the main findings.