



ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology
ESPS manuscript NO: 17934
Title: Application of a Three-dimensional Reconstruction Method for the Surgical Treatment of Hepatic Alveolar Echinococcosis
Reviewer’s code: 02445461
Reviewer’s country: France
Science editor: Ya-Juan Ma
Date sent for review: 2015-03-31 09:43
Date reviewed: 2015-05-04 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		[Y] No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		[Y] No	

COMMENTS TO AUTHORS

The paper entitled “Application of a three-dimensional reconstruction method for the surgical treatment of hepatic alveolar echinococcosis” is well written and is relevant to the surgical community. However, additional explanations are required concerning the following points: - When examining figure 2A, the method used by the authors to calculate the future remnant liver remains unclear. The liver seems to have a rigid cut surface which the authors use to calculate volumes, without paying attention to liver segments which will not be vascularized after virtual hepatectomy. The reviewer recommends that authors should attempt to provide a more precise explanation concerning their method for volumetric estimation. - There is no data concerning the amount of time spent to treat the image and produce the 3D model. - There is no information concerning the “Manual correction” mentioned by the authors. - The concept of vascular invasion is unclear. - The relationship between estimated resection liver volumes and the sheer graft weight is unclear. How could the authors calculate it? - There are no details on the surgical technique, especially regarding tools used for hepatectomy, hemostasis, and so on. - The Dindo–Clavien



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classification is mandatory in order to understand the impact of postoperative complications on morbidity. The discussion chapter is well written.



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Reviewer’s code: 00505508

Reviewer’s country: Japan

Science editor: Ya-Juan Ma

Date sent for review: 2015-03-31 09:43

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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 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 checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		BPG Search:	<input 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

Authors compared clinical outcomes of hepatectomy between patients who underwent preoperative virtual hepatectomy and those who did not in order to evaluate the reliability and accuracy of three-dimensional (3D) computer reconstruction software for liver resection for patients with hepatic alveolar echinococcosis. Many authors have already reported the clinical usefulness of 3D images prior to hepatectomy. Authors are desired to address following points. #1 Author should describe the details about how to divide the patients into two groups. #2 Authors described that Positional relationships between lesions and the hepatic vein, portal vein, and bile duct were defined. In patients with normal biliary tree, the intrahepatic bile duct could not be visualized well on CT images, especially 3D images. How did they evaluate the bile duct? #3 3D images might be more useful for inexperienced liver surgeons. How is the surgeon’s experience?