

## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 17671

**Title:** Liver resection for hepatocellular carcinoma using a microwave tissue coagulator: experience of 1118 cases

**Reviewer's code:** 02530754

**Reviewer's country:** Spain

**Science editor:** Yuan Qi

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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 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 type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input checked="" 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 checked="" type="checkbox"/> No	

## COMMENTS TO AUTHORS

The manuscript by Sasaki et al reported results from a large retrospective series of patients with hepatocellular carcinoma undergoing hepatectomy by using a microwave tissue coagulator in a single institution. The strength of the study is the impressive number of patients included, but it is weakened by the absence of a comparison group and the wide period of recruitment. The following suggestions should be taken into consideration in order to improve the manuscript: 1- In methods the authors said that before 2003 they used fresh frozen plasma as a protocol, and they divided the analysis of blood transfusion in two time periods (before and after 2003 respectively). In my opinion this is a potential source of bias, and a separate analysis of those patients with hepatectomy before 2003 makes no sense, as the results concerning blood transfusion would not be interpretable. I would suggest excluding those patients having a hepatectomy before 2003. Although the numbers would be significantly reduced, there would be still enough sample size for an appropriate analysis, and the period of recruitment will be also reduced, which will make the results more reliable and applicable to the current clinical scenario (It may well be that the selection criteria, skill of the surgeons, medical

care, and surveillance protocols have changed since 1990). 2- The retrospective design should be stated in methods. 3- In the text, exact percentages should appear whenever possible. Please avoid expressions such as “Three-fourth” or “half of the cases...”. Absolute numbers should ever be accompanied by the corresponding proportion. Please revise accordingly. 4- In Methods (Statistical analysis) the authors said that “continuous variables were summarized as medians and ranges” and that “the Mann-Whitney U test was used for comparisons”. The authors should restrict the use of median and ranges, and also non parametric tests to describe asymmetric distributions, since non parametric tests are statistically less potent. Taking into account the number of patients included, those continuous variables with normal distribution should be described with mean and standard deviations, and further compared by using student T test or ANOVA. Normality tests such as Shapiro-Wilk’s should be used to test the distribution of continuous variables. 5- Kaplan Meier curves for recurrence free and overall survival should be included in the manuscript, accompanied by the corresponding censored data. 6- Conclusions both in the abstract and in the discussion (final paragraph) are not supported by the results of the study. As no comparison cohort was included it is not appropriate to say that “using HCN by MTC resulted in less blood loss, and shorter operative time” or “no increase in the incidence of postoperative bile leakage...”. To compare the findings of the present study with other previous reports, although contemporary in some cases, is not appropriate as recognized by the authors earlier in the manuscript. The conclusions should be significantly softened in both the abstract and the discussion.