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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 22988

Title: The Benefit of Laparoscopic Liver Resection in High Body Mass Index Patients

Reviewer's code: 00187828

Reviewer's country: Turkey

Science editor: Yuan Qi

Date sent for review: 2015-10-14 08:15

Date reviewed: 2015-10-23 14:35

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" 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 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 type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
		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

The manuscript entitled "The Benefit of Laparoscopic Liver Resection in High Body Mass Index Patients" by Uchida H et al. was well-presented and written. The authors revealed the correlation between body mass index (BMI) and surgical outcomes of 68 cases performed laparoscopic liver resection (LLR) and open liver resection (OLR). The authors were able to observe a statistically significant correlation between BMI and operation time, between BMI and blood loss in OLR, but not in LLR. Open liver resection and BMI were independent predictors for prolonged operation time and increased blood loss in multivariate analysis. LLR in obese patients was safe and had great benefit without prolonged operation time and increased blood loss.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 22988

Title: The Benefit of Laparoscopic Liver Resection in High Body Mass Index Patients

Reviewer's code: 02444743

Reviewer's country: China

Science editor: Yuan Qi

Date sent for review: 2015-10-14 08:15

Date reviewed: 2015-11-02 15:11

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

The authors compared the surgical outcomes between laparoscopic liver resection (LLR) and open liver resection (OLR), and found that the mortality and morbidity of LLR is same as OLR, but the operation time and blood loss is shorter. This retrospective study shows an advantage of LLP. (1) The using of abbr. should be concerned. Such as, even if the abbr. of LLR, OLR, BMI are given in abstract, these abbr. should be given again in main text (such as in Introduction); the abb. appeared in table should give full words in table note; (2) The spelling of "gastroctony" in Introduction is wrong.