

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 52687

Title: Prognostic factors and predictors of postoperative adjuvant transcatheter arterial chemoembolization benefit in patients with resected hepatocellular carcinoma

Reviewer's code: 00225294

Position: Editorial Board

Academic degree: BM BCh, PhD

Professional title: Doctor, Professor, Senior Research Fellow

Reviewer's country: Spain

Author's country: China

Manuscript submission date: 2019-11-13

Reviewer chosen by: AI Technique

Reviewer accepted review: 2019-11-13 13:17

Reviewer performed review: 2019-11-17 10:03

Review time: 3 Days and 20 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

The authors evaluate prognostic factors and predictor indicators of the benefits of postoperative adjuvant trans-catheter arterial chemoembolization (PA-TACE) in patients with resected HCC. They incorporate this study under the umbrella of two gold-standards in the field: the BCLC and the FHR scores. Overall, the idea is of practical interest and has been applied to a cohort of HCC patients sufficiently representative and with application of equivalent criteria. The size group is relatively high and, perhaps a better statistical revision of the data for future developments of the project will enhance the value of the conclusions obtained from this study. In fact, this study offers the possibility of clinicians in the HCC surgery field to introduce rationale criteria to better decide introduction of a PA-TACE strategy. Regarding specific aspects, the title is correct in the description of the working hypothesis, the ethics is adequate for this type of studies and is relevant for transferring to the clinical practice in HCC surgery. The statistics perhaps deserves addition implementation as far as the cohort size is increased. The organization of the manuscript is perfect and the conclusions are supported by the data obtained.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☒ No

BPG Search:



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PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 52687

Title: Prognostic factors and predictors of postoperative adjuvant transcatheter arterial chemoembolization benefit in patients with resected hepatocellular carcinoma

Reviewer's code: 00053888

Position: Editorial Board

Academic degree: FRCS (Gen Surg), MD

Professional title: Attending Doctor, Doctor, Surgeon

Reviewer's country: United Kingdom

Author's country: China

Manuscript submission date: 2019-11-13

Reviewer chosen by: Jin-Zhou Tang

Reviewer accepted review: 2019-11-21 11:13

Reviewer performed review: 2019-11-21 12:25

Review time: 1 Hour

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input checked="" type="checkbox"/> Major revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

This is an interesting retrospective analysis of patients who have either undergone surgery alone or surgery and the post-operative adjuvant TACE. These patients have been retrospectively recruited over a four year period from three centres and do not appear to have had a standard regimen of treatment. They are definitely not randomised. The authors begin their long (too long) discussion by suggesting that the improvement in survival that they have seen with post-operative TACE suggests that this should be standard treatment. By the end of the discussion and conclusion they have realised that their data does not support this statement. The study is really a safety and tolerability (Stage 2) trial rather than a stage 3 outcome trial. The authors should acknowledge this more clearly. The only reason for comparing the two groups is to show that adjuvant TACE does not increase the risk over surgery alone. The discussion is too long but the manuscript is well written.

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[Y] No

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 52687

Title: Prognostic factors and predictors of postoperative adjuvant transcatheter arterial chemoembolization benefit in patients with resected hepatocellular carcinoma

Reviewer's code: 02992848

Position: Peer Reviewer

Academic degree: MD

Professional title: Staff Physician

Reviewer's country: Taiwan

Author's country: China

Manuscript submission date: 2019-11-13

Reviewer chosen by: Jin-Zhou Tang

Reviewer accepted review: 2019-11-21 05:54

Reviewer performed review: 2019-11-22 06:53

Review time: 1 Day

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
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SPECIFIC COMMENTS TO AUTHORS

When was PA-TACE done after surgery, weeks or months ? hope authors can elaborate more on this issue.

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