

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 54717

Title: Non-Invasive Tests for the prediction of primary hepatocellular carcinoma.

Reviewer's code: 03505676

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Associate Professor

Reviewer's Country/Territory: China

Author's Country/Territory: Italy

Manuscript submission date: 2020-02-14

Reviewer chosen by: AI Technique

Reviewer accepted review: 2020-02-15 02:50

Reviewer performed review: 2020-02-20 02:06

Review time: 4 Days and 23 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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SPECIFIC COMMENTS TO AUTHORS

In the paper, the authors reviewed the currently available literature on biochemical and ultrasound-based scores developed for the non-invasive evaluation of liver fibrosis and portal hypertension in predicting primary HCC and recognized the APRI score and the Fib-4 index as the most reliable methods to assess HCC risk. It is very valuable for improving clinical practice. Several minor issues should be addressed before possible acceptance. 1. Very importantly, a summarized table showing cutoff values of a variety of indexes in predicting HCC risk based on different liver disease aetiologies should be made, in order to present more clearly the potential of various indexes. 2. If possible, the advantages and disadvantages of markers in serum could be discussed. 3. Whether can these tests distinguish HCC risk from ICC risk?

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 54717

Title: Non-Invasive Tests for the prediction of primary hepatocellular carcinoma.

Reviewer's code: 03741310

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Associate Professor, Attending Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: Italy

Manuscript submission date: 2020-02-14

Reviewer chosen by: AI Technique

Reviewer accepted review: 2020-02-15 03:13

Reviewer performed review: 2020-03-01 05:06

Review time: 15 Days and 1 Hour

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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SPECIFIC COMMENTS TO AUTHORS

The authors reviewed the performance of a panel of reported non-invasive tests for the prediction of HCC. I have to say that all these tests reviewed by the authors were primarily designed for the prediction of cirrhosis but not HCC. It is true that cirrhosis is strongly associated with HCC, but cirrhosis is not HCC. It may not be a good idea, with less help, to predict the onset of HCC using something that was not directly associated it. Nevertheless, I agree to publish this manuscript as currently there is no such review focusing this issue. The following were my concerns: 1. The author should reorganize the manuscript thoroughly, one test one paragraph, each test state different liver diseases in the same order. The current version is hard for reading. 2. The authors should at least give essential tables summarizing core information including test name, patient numbers, cut-off value, prediction value, etc. 3. ALBI and PALBI were mainly used in evaluating outcomes of patient already have HCC, not for prediction the occurrence of HCC. I do not suggest the authors review literatures studying the connection of non-invasive tests and the outcome of patients with HCC. Predicting the occurrence and the outcome were different questions.