

# PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 66999

Title: Fluorescent cholangiography: An up-to-date overview twelve years after the first

clinical application

**Reviewer's code:** 05038630

**Position:** Editorial Board

Academic degree: MD, PhD

Professional title: Assistant Professor, Surgeon

Reviewer's Country/Territory: Slovenia

Author's Country/Territory: Italy

Manuscript submission date: 2021-04-15

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-04-15 16:39

Reviewer performed review: 2021-04-24 10:01

Review time: 8 Days and 17 Hours

Scientific quality	[ ] Grade A: Excellent [Y] Grade B: Very good [ ] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish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



#### SPECIFIC COMMENTS TO AUTHORS

I would really like to commend the authors for this really well written paper about a very interesting and promising topic.



# PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 66999

Title: Fluorescent cholangiography: An up-to-date overview twelve years after the first

clinical application

**Reviewer's code:** 04105454

**Position:** Editorial Board

Academic degree: MD

Professional title: Professor

Reviewer's Country/Territory: Egypt

Author's Country/Territory: Italy

Manuscript submission date: 2021-04-15

Reviewer chosen by: Jin-Lei Wang

Reviewer accepted review: 2021-06-02 16:16

Reviewer performed review: 2021-06-02 16:21

Review time: 1 Hour

Scientific quality	[ ] Grade A: Excellent [Y] Grade B: Very good [ ] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish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



#### SPECIFIC COMMENTS TO AUTHORS

Well done review article



# PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 66999

Title: Fluorescent cholangiography: An up-to-date overview twelve years after the first

clinical application

**Reviewer's code:** 03665440

**Position:** Peer Reviewer

Academic degree: MD

**Professional title:** Professor

Reviewer's Country/Territory: Japan

Author's Country/Territory: Italy

Manuscript submission date: 2021-04-15

Reviewer chosen by: Jin-Lei Wang

Reviewer accepted review: 2021-06-02 04:08

Reviewer performed review: 2021-06-06 02:31

Review time: 3 Days and 22 Hours

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



#### SPECIFIC COMMENTS TO AUTHORS

This is an interesting review aiming to describe recent studies regarding near-infrared fluorescent cholangiography (NIFC) for laparoscopic cholecystectomy (LC). In a few years, there has been an increasing body of literature for the fluorescent cholangiography as a promising tool to avoid bile duct injury. It is still unclear whether this procedure provides any additional security during LC with a meticulous dissection to achieve a critical view of safety (CVS). Nonetheless, I agree with the authors in the point that NIFC is a useful teaching tool for young surgeons, because the real-time cholangiography can show them how close to the dissecting site the bile duct is running in the laparoscopic view. This review article seems useful to update our knowledge of the published evidence concerning this topic. Nonetheless, I would prefer to be informed about potentially important issues as follows. #1 The method has a potential to be used in a large population of patients. Therefore, a comment for the risk of rare anaphylactic reaction to iodine would be needed in this kind of article. #2 As the authors mentioned in the manuscript, cholecystitis and obesity potentially hamper the visualization of the bile duct by NIFC. Then, can we say that there is sufficient thickness between the dissecting site and the bile duct when the fluorescence of the bile duct cannot be detected? How is the possibility of "false-negative" cases of fluorescent cholangiography to delineate the bile duct?



# PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 66999

Title: Fluorescent cholangiography: An up-to-date overview twelve years after the first

clinical application

Reviewer's code: 05122255

**Position:** Peer Reviewer

Academic degree: MD

Professional title: Reader (Associate Professor), Surgeon, Surgical Oncologist

Reviewer's Country/Territory: Taiwan

Author's Country/Territory: Italy

Manuscript submission date: 2021-04-15

Reviewer chosen by: Jin-Lei Wang

Reviewer accepted review: 2021-06-04 03:36

Reviewer performed review: 2021-06-15 05:27

Review time: 11 Days and 1 Hour

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



#### SPECIFIC COMMENTS TO AUTHORS

This manuscript is more like a narrative review of ICG application in identification of extra-hepatic biliary system and its benefits to cholecystectomy. Personally, I also have some experience of ICG application. This review is comprehensive and authors mentioned different aspects of ICG application. I only have one opinion. For the figure 1, please add a photo of pre-dissection. According to the original image, that case seemed to be a simple case of laparoscopic cholecystectomy. I would not like to use ICG in this case. I suggested author should put a photo of pre-dissection, then ICG illustration of biliary tree, and a photo of complete dissection of critical area. In that way, it will be more persuasive. I suggested minor revision and then accept this work. Thank you.