

## PEER-REVIEW REPORT

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

**Manuscript NO:** 75106

**Title:** Natural history and outcomes of patients with liver cirrhosis complicated by hepatic hydrothorax

**Provenance and peer review:** Unsolicited manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 03550401

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Professor

**Reviewer's Country/Territory:** China

**Author's Country/Territory:** Australia

**Manuscript submission date:** 2022-01-24

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-01-26 01:05

**Reviewer performed review:** 2022-01-26 09:44

**Review time:** 8 Hours

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 Grade E: Do not publish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 checked="" type="checkbox"/> Grade A: Priority publishing <input 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No

<b>Peer-reviewer statements</b>	Peer-Review: [ <input checked="" type="radio"/> ] Anonymous [ <input type="radio"/> ] Onymous Conflicts-of-Interest: [ <input type="radio"/> ] Yes [ <input checked="" type="radio"/> ] No
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## SPECIFIC COMMENTS TO AUTHORS

1. The author used the Cox proportional hazards regression survival model to analyze the time of onset of HH to death and transplant-free survival, So would it make more sense to use a competing risk model? 2. The author indicated that "Within 12-months of the index admission, 22 (26%) patients had 1 readmission, 9 (11%) had 2 readmissions, and 12 (14%) had  $\geq 3$  readmissions." We surmised that a total of 43 patients had readmission. But then the authors describe "Overall, 63 (75%) patients had at least 1 readmission within 6 months." what do you mean? Also, author described "a further 62 procedures were performed on 33 of 84 (40%) readmitted patients." It is rather difficult to understand. 3. The author indicated that "No overall survival benefit from TIPS insertion was demonstrated, but transplant-free survival was higher (hazard ratio, 0.13; 95% CI: 0.02–0.96), as no patient who had TIPS insertion underwent LT." Could you provide responsiveness after TIPS, there were studies showing that Better clinical response after TIPS were associated with longer survival after TIPS. (Dhanasekaran R, West JK, Gonzales PC, Subramanian R, Parekh S, Spivey JR, Martin LG, Kim HS. Transjugular intrahepatic portosystemic shunt for symptomatic refractory hepatic hydrothorax in patients with cirrhosis. *Am J Gastroenterol*. 2010 Mar;105(3):635-41. pii: ajg2009634. doi: 10.1038/ajg.2009.634. PubMed PMID: 19904245.) 4. Please add references for acute kidney injury.

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**Peer-review model:** Single blind

**Reviewer's code:** 05430684

**Position:** Peer Reviewer

**Academic degree:** MD, MSc, PhD

**Professional title:** Chief Doctor

**Reviewer's Country/Territory:** Greece

**Author's Country/Territory:** Australia

**Manuscript submission date:** 2022-01-24

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-02-08 16:19

**Reviewer performed review:** 2022-02-13 17:52

**Review time:** 5 Days and 1 Hour

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 checked="" type="checkbox"/> Grade A: Priority publishing <input 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 checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

<b>Peer-reviewer statements</b>	Peer-Review: [ <input type="checkbox"/> ] Anonymous [ <input checked="" type="checkbox"/> ] Onymous Conflicts-of-Interest: [ <input type="checkbox"/> ] Yes [ <input checked="" type="checkbox"/> ] No
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#### **SPECIFIC COMMENTS TO AUTHORS**

Dear Editor, Permit me to express my gratitude for giving me the opportunity to review the manuscript entitled "Natural history and outcomes of patients with liver cirrhosis complicated by hepatic hydrothorax" by Romero S. et al. The manuscript deals with a multi-center retrospective cohort study of cirrhotic patients regarding an interesting topic, namely that of hepatic hydrothorax (HH). Interestingly, the authors conclude that smoking and acute kidney injury are of independent prognostic value regarding overall survival in HH. The methodology is sound, while the statistical analysis is adequate. Discussion is clear, and limitations are presented in a comprehensive manner. Except some minor errors (e.g. Page 12, Line 2: Amend "dose of diuretics used were similar" for "dose of diuretics used was similar"), grammar and syntax are proper. Under these circumstances, I would propose acceptance for publication as is.

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**Title:** Natural history and outcomes of patients with liver cirrhosis complicated by hepatic hydrothorax

**Provenance and peer review:** Unsolicited manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 05424290

**Position:** Editorial Board

**Academic degree:** MBBS, MD

**Professional title:** Academic Research, Doctor, Professor

**Reviewer's Country/Territory:** India

**Author's Country/Territory:** Australia

**Manuscript submission date:** 2022-01-24

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-02-08 07:56

**Reviewer performed review:** 2022-02-16 10:41

**Review time:** 8 Days and 2 Hours

<b>Scientific quality</b>	<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
<b>Language quality</b>	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

<b>Peer-reviewer statements</b>	Peer-Review: [ <input checked="" type="radio"/> ] Anonymous [ <input type="radio"/> ] Onymous Conflicts-of-Interest: [ <input type="radio"/> ] Yes [ <input checked="" type="radio"/> ] No
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## **SPECIFIC COMMENTS TO AUTHORS**

Reviewer comments The study has included patients of hepatic hydrothorax in cirrhosis of liver. The authors have assessed baseline characteristics including 12-month overall and transplant free survival. I have few comments. 1. The methods should include how pleural fluid analysis was interpreted. The values of SPAG, pleural fluid protein etc should be included as per standard guidelines. 2. Infections are one of the most common cause of acute decompensation in cirrhosis. SBP and SBE are most common sites of infection. Therefore, Patients having spontaneous bacterial empyema on first diagnosis of HH should be given. Additionally, readmissions due to SBE should also be given in results. 3. In patients who had readmissions, compliance to salt restriction, diuretic therapy and adequate follow up should be given to determine whether it was a therapy failure or patient non-compliance which was adding to HH recurrence.

## RE-REVIEW REPORT OF REVISED MANUSCRIPT

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**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Professor

**Reviewer's Country/Territory:** China

**Author's Country/Territory:** Australia

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**Reviewer chosen by:** Jing-Jie Wang

**Reviewer accepted review:** 2022-04-30 02:48

**Reviewer performed review:** 2022-04-30 11:34

**Review time:** 8 Hours

<b>Scientific quality</b>	<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
<b>Language quality</b>	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input checked="" type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Peer-reviewer</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous



**Baishideng  
Publishing  
Group**

7041 Koll Center Parkway, Suite  
160, Pleasanton, CA 94566, USA  
**Telephone:** +1-925-399-1568  
**E-mail:** bpgoffice@wjgnet.com  
<https://www.wjgnet.com>

statements

Conflicts-of-Interest: [ ] Yes [Y] No

## SPECIFIC COMMENTS TO AUTHORS

no more comments