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PEER-REVIEW REPORT

Name of journal: *World Journal of Gastroenterology*

Manuscript NO: 89452

Title: Hepatic arterial infusion chemotherapy with/without anti-angiogenesis agents and immune checkpoint inhibitiors for unresectable hepatocellular carcinoma and meta-analysis

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05747976
Position: Peer Reviewer
Academic degree: MD
Professional title: Assistant Professor, Doctor, Postdoc, Postdoctoral Fellow, Researcher, Senior Researcher
Reviewer's Country/Territory: United States
Author's Country/Territory: China

Manuscript submission date: 2023-11-01

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-11-20 23:25

Reviewer performed review: 2023-11-30 03:28

Review time: 9 Days and 4 Hours

Scientific quality	[Y] Grade A: Excellent [ ] Grade B: Very good [ ] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Novelty of this manuscript	[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No novelty

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Creativity or innovation of this manuscript	[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No creativity or innovation
Scientific significance of the conclusion in this manuscript	[Y] Grade A: Excellent [ ] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No scientific significance
Language quality	[Y] Grade A: Priority publishing [ ] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	[ ] Accept (High priority) [Y] Accept (General priority) [ ] Minor revision [ ] Major revision [ ] Rejection
Re-review	[Y] Yes [ ] No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [ ] Onymous
	Conflicts-of-Interest: [ ] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

This study had two major original components: A network meta-analysis suggesting HAIC-based regimens as first-line treatment for advanced HCC A real-world study finding significantly improved efficacy (PFS, OS) with acceptable safety for triple therapy (HAIC + angiogenesis inhibitors + PD(L)1 blockades) compared to AIPB The key hypothesis that was confirmed was that triple therapy would outperform AIPB for advanced HCC in a real-world Chinese population even though AIPB is guideline-recommended. This is a high quality study using appropriate methods and rigorous analyses. The findings are important given the lack of real-world evidence for triple therapy and help provide direction for first-line treatment selection. Unique insights: HAIC-based regimens, not just AIPB, should be considered for advanced HCC Efficacy benchmarks for triple therapy in real-world practice Factors like Child-Pugh score and number of HAIC cycles impact outcomes The conclusions accurately reflect

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the data presented. This moves the field forward by validating an emerging combination therapy. Limitations are a single-center retrospective study with inherent biases. Additional prospective trials should evaluate optimal regimens, biomarkers, and safety. Future research can assess triple therapy in populations mirroring real-world demographics and disease characteristics. This could alter clinical practice by providing an evidence-based alternative to AIPB with improved outcomes.