

PEER-REVIEW REPORT

Name of journal: *World Journal of Gastrointestinal Surgery*

Manuscript NO: 65552

Title: Current status of liver transplantation for cholangiocarcinoma

Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03021264

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Professor

Reviewer's Country/Territory: China

Author's Country/Territory: United States

Manuscript submission date: 2021-04-07

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-04-22 14:29

Reviewer performed review: 2021-04-26 08:17

Review time: 3 Days and 17 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" 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 Grade E: Do not publish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 checked="" type="checkbox"/> No
Peer-reviewer	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous

statements

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

SPECIFIC COMMENTS TO AUTHORS

The topic selection is very good because liver transplantation for the treatment of cholangiocarcinoma is one of the hot issues in this field. However, the review of liver transplantation for hilar cholangiocarcinoma and intrahepatic cholangiocarcinoma is simple and not thorough enough. For example, in the treatment of intrahepatic cholangiocarcinoma, the article only mentioned Very-early iCCA in cirrhosis and Locally advanced iCCA. Risk factors for recurrence of intrahepatic cholangiocarcinoma after transplantation, neoadjuvant therapy, targeted therapy, etc. were not summarized.