



**PEER-REVIEW REPORT**

**Name of journal:** *World Journal of Gastrointestinal Surgery*

**Manuscript NO:** 78778

**Title:** Reconstructing the portal vein through a posterior pancreatic tunnel: New choice for portal vein thrombosis during liver transplantation

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

**Peer-review model:** Single blind

**Reviewer’s code:** 03742333

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Doctor, Full Professor, Professor, Surgeon

**Reviewer’s Country/Territory:** Brazil

**Author’s Country/Territory:** China

**Manuscript submission date:** 2022-07-14

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-07-19 14:32

**Reviewer performed review:** 2022-07-19 15:44

**Review time:** 1 Hour

<b>Scientific quality</b>	<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 Grade E: Do not publish
<b>Language quality</b>	<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
<b>Conclusion</b>	<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
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No



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<b>Peer-reviewer statements</b>	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 manuscript is well written, and the topic of clinical interest. An alternative technique to approach complex portal vein thrombosis is described, although surgically complex and demanding (what makes its clinical applicability questionable). The manuscript has figures and tables which complement the text. Major comments are the need to discuss the results (morbidity and mortality) of alternative surgical approaches to complex portal vein thrombosis. Minor comments are the need to mention Figure 1 throughout the text and a careful language review.



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**Reviewer's code:** 02539765

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Associate Professor

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

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

**Manuscript submission date:** 2022-07-14

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-07-14 13:55

**Reviewer performed review:** 2022-07-23 02:24

**Review time:** 8 Days and 12 Hours

<b>Scientific quality</b>	<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
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### **SPECIFIC COMMENTS TO AUTHORS**

The authors of this preliminary study have proposed a novel surgical technique for complicated PVT in LT patients. Since there is no agreement on the best techniques for PV reconstruction, this is a significant issue. Although the write-up is good and the concept seems innovative, the study is constrained by its retrospective methodology, small patient population, and brief follow-up. It seems more like a case series than a proper original study.