



**PEER-REVIEW REPORT**

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

**Manuscript NO:** 52958

**Title:** Prognostic significance of systemic immune-inflammation index in patients with intrahepatic cholangiocarcinoma undergoing hepatic resection

**Reviewer's code:** 00054255

**Position:** Editor-in-Chief

**Academic degree:** MD, PhD

**Professional title:** Professor

**Reviewer's country:** South Korea

**Author's country:** China

**Manuscript submission date:** 2019-12-13

**Reviewer chosen by:** Jin-Lei Wang

**Reviewer accepted review:** 2020-02-03 04:24

**Reviewer performed review:** 2020-02-06 06:47

**Review time:** 3 Days and 2 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input checked="" type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input checked="" type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No



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## **SPECIFIC COMMENTS TO AUTHORS**

This manuscript is retrospective study regarding prognostic significance of systemic immune-inflammatory index for the intrahepatic cholangiocarcinoma. This concept was based on the inflammation make worse prognosis. The formula and the method for calculation of the optimal cutoff value(SII =450) that the authors used is to be described, even though that was shown in previous reports. Additionally the definition of SII is amenable to be described, general concept and the specific formula for this study to understand the meaning. In table 1 & 2, the factors and values are so complex, need to be simplified. For example, BCLC stage is used for HCC generally, not for cholangiocarcinoma. Decimal is to be unified, ex) 5.1, not 5.13. The values in table 2, the meaning of the value in the parenthesis is different among the factors. For example 57.89(9.53) of the age, what is the 9.53? The values in each factors may be different, which is to be differentiated. The survival curve in subgroup analysis are too many. Too many factors included, so too complex. The most important several figures give stronger impact. Authors mentioned that high SII group were associated with significant decreased frequencies of solitary tumor and node invasion. Reviewer has question whether it is the cause or effect. Putting interpretation of the meaning of this is amenable.

## **INITIAL REVIEW OF THE MANUSCRIPT**

### ***Google Search:***

- The same title
- Duplicate publication
- Plagiarism
- No



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- No



**RE-REVIEW REPORT OF REVISED MANUSCRIPT**

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

**Manuscript NO:** 52958

**Title:** Prognostic significance of systemic immune-inflammation index in patients with intrahepatic cholangiocarcinoma undergoing hepatic resection

**Reviewer's code:** 00054255

**Position:** Editor-in-Chief

**Academic degree:** MD, PhD

**Professional title:** Professor

**Reviewer's country:** South Korea

**Author's country:** China

**Manuscript submission date:** 2019-12-13

**Reviewer chosen by:** Ze-Mao Gong

**Reviewer accepted review:** 2020-03-20 20:58

**Reviewer performed review:** 2020-03-20 22:14

**Review time:** 1 Hour

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input checked="" type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input checked="" type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No



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#### **SPECIFIC COMMENTS TO AUTHORS**

The revised manuscript was corrected and improved for readers. However the table and figures are too complex. Generally, precise simple message from the scientific paper, especially for the clinical paper, is preferred.

#### **INITIAL REVIEW OF THE MANUSCRIPT**

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