

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

PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Oncology

Manuscript NO: 64949

Title: Role of mammalian target of rapamycin complex 2 in primary and secondary liver

cancer

Reviewer's code: 05068976 Position: Peer Reviewer Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Spain

Author's Country/Territory: Germany

Manuscript submission date: 2021-02-25

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-02-25 17:36

Reviewer performed review: 2021-03-17 11:28

Review time: 19 Days and 17 Hours

Scientific quality	[Y] Grade A: Excellent [] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
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) [] Accept (General priority) [Y] Minor revision [] Major revision [] Rejection
Re-review	[]Yes [Y]No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No



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SPECIFIC COMMENTS TO AUTHORS

The manuscript by Joechle et al. constitutes a review manuscript on the role of mTORC2 in primary and secondary liver cancer. The authors herein provide a very critical, complete and comprehensive revision on this topic. The manuscript is very well-written and get together all the relevant information in the field. I only have small comments that might increase even more the quality of this great review. - The authors only mention intrahepatic cholangiocarcinoma. What about the other types of CCA? And other types of liver malignancies, such as hepatoblastoma? Mixed HCC-iCCA tumors? - Could the authors provide some information regarding the relevance of mTORC2 in pre-tumoral conditions such as fibrosis, NAFLD, viruses, alcohol, PSC, PBC, etc? It would be important to understand if the alterations are already evident in pre-malignant states. - This manuscript would greatly benefit from a summary table with the information of mTORC2 (or the mediators of this pathway) regarding levels and correlation with clinics in the several cancers discussed.