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PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Oncology

Manuscript NO: 81462

Title: Conditional survival probability of distant-metastatic hepatocellular carcinoma: A

population-based study

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 02944288 Position: Editorial Board Academic degree: MD

Professional title: Assistant Professor, Lecturer, Surgeon

Reviewer's Country/Territory: Russia

Author's Country/Territory: China

Manuscript submission date: 2023-06-24

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-07-18 06:57

Reviewer performed review: 2023-07-22 00:58

Review time: 3 Days and 18 Hours

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	[] Grade D: Fair [] Grade E: Do not publish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



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Scientific significance of the	[] Grade A: Excellent [] Grade B: Good [Y] Grade C: Fair
conclusion in this manuscript	[] Grade D: No scientific significance
Language quality	[] Grade A: Priority publishing [Y] 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

SPECIFIC COMMENTS TO AUTHORS

Dear authors. From my point of view your article needs minor revision. The number of references is small. References for conditional survival in other tumors are more than 20 years old. Large number of authors did not consider chemotherapy and radiation are able to boost OS rate in distant metastatic disease. So you have to be careful with such a conclusion. worse survival in not-chemo-radiotherapy patients may be due to poor condition of that patients (so they could not tolerate chemo-radiotherapy) or other factors.



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Reviewer's code: 05569437 Position: Editorial Board Academic degree: MD, PhD

Professional title: Adjunct Professor, Attending Doctor, Postdoctoral Fellow, Surgical

Oncologist

Reviewer's Country/Territory: Italy
Author's Country/Territory: China

Manuscript submission date: 2023-06-24

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-07-24 21:32

Reviewer performed review: 2023-08-01 13:36

Review time: 7 Days and 16 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] 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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Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [] Minor revision [Y] 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

In this study, the authors investigated overall survival (OS), cancer specific survival (CSS) and conditional survival (CS) at 3 different moments from diagnosis, of patients affected by metastatic HCC. In particular, they investigated factors associated with shorter OS, CSS and CS. The majority of patients affected by metastatic HCC have a very short survival, with less than 20% of them surviving more than 12 months. In this context, the realiability of survival predictors of OS and CSS may be limited; CS may help to identify survival predictors at a particular time from diagnosis. The authors found that, as OS and CSS decreased over time, CS increased. They also found that factors impacting on survivals changed according to different CS time points. This study is overall quite well written and designed, however I have some comments. I suggest the authors to carefully review the manuscript: some grammar/ortograph mistakes can be found in the text, for example: introduction line 4, I suggest to replace "comprising" with



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"Accounting for". Paragraph "Comparison of OS and CSS", line 13 .And patients with bone metastases "who (add)" received radiotherapy even... . In particular, the discussion needs to be re-reviewed: some sentences have no verb and are difficult to understand. I suggest the authors to use in the tables, for p values values, real numbers (0.045) instead of notations like 4.57e-02. this may make the table more understandable. as acknoledged by the authors in the study limitations paragraph, patients survivals is affected by the use of combo therapy of new generation and, in this context, focusing on a study population of patients diagnosed in average 10 years ago may make the study results not reliable: please comment on this. finally, I suggest the authors to expand on the importance of their findings: how knowing CS and related predictors of survival may impact on clinical practice?