



**ESPS PEER-REVIEW REPORT**

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

**ESPS manuscript NO:** 17046

**Title:** Screening for hepatocellular carcinoma by Egyptian physicians

**Reviewer’s code:** 02861217

**Reviewer’s country:** Armenia

**Science editor:** Xue-Mei Gong

**Date sent for review:** 2015-02-13 11:25

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
		BPG Search:	<input checked="" type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

**COMMENTS TO AUTHORS**

Dear authors, Your manuscript is an interesting and very important study of Egyptian Physicians awareness and Screening for Hepatocellular Carcinoma. No doubt that it could influence on farther Egyptian Physicians (and not only) daily practice and MOH attitude to HCC in Egypt. After some correction manuscript can be published in World Journal of Hepatology. Nevertheless, there are a lot off mechanical mistakes and problem with interval between words in the text (some of them mentioned with red, please rechecked one more time) and some conceptual inaccuracies: ? There is not clear information about guideless in the Management of HCC patients in Egypt. According to the text, Egyptian Physicians use both AASALD or EASL guideless. Which one is preferable be your authorities? Do you have your one, adopted for Egypt version? ? In Statistical Analyses part it will be better to mentioned not only Statistical Package, but add precise information about using Statistical methods. ? In Table 2A and 3D there are some mechanical mistakes; In Table 2C - it will be better to mentioned difference between figures/numeric’s in columns by different symbols, for instance between column 1 and 2 with \*, column 2 and 3 - \*\*, column 1 and 3 - \*\*\*; In Table 3C - absence of some percentage; Table 4B - figures are not equal in style. ? In Discussion part, Authors



## BAISHIDENG PUBLISHING GROUP INC

8226 Regency Drive, Pleasanton, CA 94588, USA

Telephone: +1-925-223-8242

Fax: +1-925-223-8243

E-mail: [bpgoffice@wjgnet.com](mailto:bpgoffice@wjgnet.com)

<http://www.wjgnet.com>

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shown results of questioner in USA, but not always compare with that very topic results in Egypt. ? In Discussion part, it could be reasonable to noticed and subdivided physicians according to correct and in-correct answers by existing "Management of HCC patients" guideless. Best regards

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### COMMENTS TO AUTHORS

Ehab et al submit an interesting review outlining assessing the practice of Egyptian physicians in screening patients for HCC. May be different physicians having different professional experience could have different opinions about HCC. The matter is such useful and interesting, however the paper suffers for some limits: 1 The overall quality of the English language remains poor, including some grammatical errors, spelling mistakes and so on. 2 The study included 154 physicians who care for patients at risk for HCC development. In my eyes, the number of physicians from different hospitals all over Egypt needs to be more, 154 is too less. 3 Literature references are too old to cite. If there are more articles which are published recently, the citations should be update. 4 I'm not convinced that just the questionnaire and the little analysis are clinically meaningful. Is it useful or novel enough to improve the clinical diagnosis? 5 About "Personal Data of Participating Physicians", besides age, specialty, highest qualification, clinical practice, I think gender is needed. 6 About "relation with physicians' specialty", whether there is significant or not between specialties about HBV or HCV infection and/or liver cirrhosis at risk to develop an HCC is unnecessary, the relationship between HBV or HCV and HCC has been highly recognized worldwide. This part is



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8226 Regency Drive, Pleasanton, CA 94588, USA

Telephone: +1-925-223-8242

Fax: +1-925-223-8243

E-mail: [bpgoffice@wjgnet.com](mailto:bpgoffice@wjgnet.com)

<http://www.wjgnet.com>

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unnecessarily lengthy. 7 The last part: "Our questionnaire study further shows that most doctors recommend screening of patients with hemochromatosis, as recommended by the AASLD guidelines, defining hereditary hemochromatosis as risk factor for HCC development." This part is too long to describe and something should be deleted. This paper aims to give a description of assessing the practice of Egyptian physicians in screening patients for HCC, instead of this unnecessary part, so I think you need to clearly describe in the text, by providing better visualization of data