

PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

Manuscript NO: 55296

Title: Is right lobe liver graft without main right hepatic vein suitable for living donor liver transplantation?

Reviewer's code: 03021264

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Professor

Reviewer's Country/Territory: China

Author's Country/Territory: Turkey

Manuscript submission date: 2020-03-09

Reviewer chosen by: AI Technique

Reviewer accepted review: 2020-03-10 11:38

Reviewer performed review: 2020-03-12 12:32

Review time: 2 Days

Scientific quality	<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 Grade E: Do not publish
Language quality	<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
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



**Baishideng
Publishing
Group**

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

SPECIFIC COMMENTS TO AUTHORS

This paper introduced a rare reconstruction method of hepatic vein with right lobe liver graft, which is helpful for clinical work. The author had reported one case in the past, this time increase to two cases with the same technical method. The descriptions of the two cases in this paper were duplicated and should be simplified. There were a few spelling mistakes in the article, please correct them.

PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

Manuscript NO: 55296

Title: Is right lobe liver graft without main right hepatic vein suitable for living donor liver transplantation?

Reviewer's code: 03537672

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Assistant Professor

Reviewer's Country/Territory: Japan

Author's Country/Territory: Turkey

Manuscript submission date: 2020-03-09

Reviewer chosen by: AI Technique

Reviewer accepted review: 2020-03-10 09:05

Reviewer performed review: 2020-03-27 23:15

Review time: 17 Days and 14 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<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
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

Summary of the article This article is the report of two cases of living donor liver transplantation using right liver graft with rudimentary or congenitally absence of right hepatic vein. And their conclusion is that these congenital variations of the hepatic venous structure are not contraindication for living donor liver transplantation.

Comments to the authors The anatomical aspects of these two cases are actually interesting, however, it might not be clinically disadvantage to the extent that sufficient venous drainage area is secured. And it would not be critical to the drainage efficacy the position of the main hepatic venous orifice as long as adequate anastomosis to the inferior vena cava is established. The authors should explain the importance of the right hepatic vein itself even though if thick inferior right hepatic vein present. Major concerns

1. The authors described total liver volume and preoperative expected graft volume in both cases. It would be better for the authors to measure the volume of each drainage area of rudimentary right hepatic vein and compensatory inferior right hepatic veins as long as the volumetric analysis software is available in their institute.
2. It is better to depict three-dimensional reconstructed image to show the relationships between portal tributaries and hepatic venous tributaries, or at least, actual CT images that exhibit the rudimentary right hepatic vein.
3. The authors should describe the way of venous reconstruction in their institute, for normal right hepatic vein cases, then discuss the difference between normal cases and these two cases.

Minor problems

1. In discussion, the description of the way, the remnant liver volume is $> 30\%$ or not, to make a decision whether the middle hepatic vein is included to the graft or not is off topic matter.
2. The authors had better to mention the lower limit of the remnant liver volume for donor safety in right liver graft procurement in their institute.

PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

Manuscript NO: 55296

Title: Is right lobe liver graft without main right hepatic vein suitable for living donor liver transplantation?

Reviewer's code: 03479126

Position: Peer Reviewer

Academic degree: MD

Professional title: Assistant Professor

Reviewer's Country/Territory: China

Author's Country/Territory: Turkey

Manuscript submission date: 2020-03-09

Reviewer chosen by: AI Technique

Reviewer accepted review: 2020-03-10 14:49

Reviewer performed review: 2020-03-29 15:54

Review time: 19 Days and 1 Hour

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<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
Conclusion	<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
Re-review	<input type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



**Baishideng
Publishing
Group**

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

SPECIFIC COMMENTS TO AUTHORS

This paper provided two interesting cases related with LDLT. Considering that LDLT is a main surgical procedure in liver transplantation, which is a important supplementary to DCD. However, the safety of the donors and a adequate functional liver volume for recipient are major concerns. To provide functional liver volume, the venous outflow construction is critical to reduce the post-operative liver failure, to our knowledge, RL-LDLT mostly performed with a donor right graft wiith right hepatic vein. However, the authors reported two marginal donors absence with RHV, and the surgical outcomes are receptible. We recommed the authors providing more fundemental information about the two procedures, for example, the CT-scan of the donors, and the detail measurement of the reconstructed IRHV.