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## PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

Manuscript NO: 73099

Title: Long Term Liver Allograft Fibrosis: A Review with Emphasis on Idiopathic

Post-Transplant Hepatitis and Chronic Antibody Mediated Rejection

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05646946

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: India

Manuscript submission date: 2021-11-09

Reviewer chosen by: Fei-Yan Lin

Reviewer accepted review: 2022-04-03 13:30

Reviewer performed review: 2022-04-07 12:44

Review time: 3 Days and 23 Hours

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Language quality	<ul> <li>[ ] Grade A: Priority publishing [Y] Grade B: Minor language polishing</li> <li>[ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection</li> </ul>
Conclusion	<ul> <li>[ ] Accept (High priority) [ ] Accept (General priority)</li> <li>[ Y] Minor revision [ ] Major revision [ ] Rejection</li> </ul>
Re-review	[ ]Yes [Y]No



# Baishideng **Publishing**

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Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous
statements	Conflicts-of-Interest: [ ] Yes [Y] No

### SPECIFIC COMMENTS TO AUTHORS

1. Advances preservation techniques, perioperative and in organ care immunosuppression have resulted in greatly improved long-term survival in patients undergoing liver transplantation (LT). Consequently, a continued assessment of the liver allograft in these patients to ensure optimal graft function is becoming increasingly important.Pathological findings are frequently present in liver biopsies obtained after a year post LT. The significance of these findings is uncertain as many of these are seen in protocol liver biopsies from patients with clinically good allograft function and normal liver chemistry parameters. This review has novelty and clinical value. It opens up the research thinking of Liver Allograft Fibrosis and has guiding significance for carrying out relevant research, exploring the new reliable predictive immune biomarkers mode of Liver Allograft Fibrosis and improving the prognosis of liver transplantation. 2. The title, abstract and key words are accurate and basically reflect the study. The language is fluent and there is few grammatical errors. 3. Outlook: look for reliable predictive immune biomarkers to reduce protocol biopsies.



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Peer-review model: Single blind

Reviewer's code: 02860506

**Position:** Peer Reviewer

Academic degree: MD, PhD

Professional title: Chief Doctor, Professor, Surgeon

Reviewer's Country/Territory: China

Author's Country/Territory: India

Manuscript submission date: 2021-11-09

Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-05-05 04:34

Reviewer performed review: 2022-05-12 15:08

Review time: 7 Days and 10 Hours

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [ ] Grade C: Good [ Y] Grade D: Fair [ ] Grade E: Do not publish
Language quality	[ ] Grade A: Priority publishing [ ] Grade B: Minor language polishing [ Y] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	<ul> <li>[ ] Accept (High priority) [ ] Accept (General priority)</li> <li>[ ] Minor revision [ Y] Major revision [ ] Rejection</li> </ul>
Re-review	[Y]Yes []No



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statements	Conflicts-of-Interest: [ ] Yes [Y] No

#### SPECIFIC COMMENTS TO AUTHORS

In the manuscript entitled "Long Term Liver Allograft Fibrosis: A Review with Emphasis on Idiopathic Post-Transplant Hepatitis and Chronic Antibody Mediated Rejection", authors have summarized the factors contributed to LAF and emphasized on IPLTH and CAMR. There are also some comments taken for consideration: 1. Authors seem to introduced LAF, IPLTH and CAMR individually, but haven't showed the importance of IPLTH and CAMR in LAF, especially compared with other LAF reasons (like cellular immunity). 2. Incidence of allograft fibrosis should be supplemented, especially for the pediatric LT recipients. An illustration figure or a table for factors of long-term LAF is supposed to be supplemented. And What are differences between adult and pediatric LT recipients in LAF? Incidence? Mechanism? 3. Parts entitled "Metrics for Liver Allograft Fibrosis", "Complement component 4d (C4d) Immunostaining" and "Operational Tolerance & Liver Allograft Fibrosis: The Equipoise" don't connect tightly with the emphasis of the manuscript. It is suggested to re-organize the text. 4. The manuscript needs to be polished. Some of the descriptions are colloquial and not professional. Please pay attention to the gramma and the word spelling.