PEER-REVIEW REPORT

Name of journal: *World Journal of Hepatology*

Manuscript NO: 74961

Title: Modified preoperative score to predict disease-free survival for hepatocellular carcinoma patients with surgical resections

Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03769712

Position: Editorial Board

Academic degree: MD

Professional title: Associate Professor

Reviewer's Country/Territory: China

Author's Country/Territory: Taiwan

Manuscript submission date: 2022-01-12

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-01-19 10:38

Reviewer performed review: 2022-01-19 11:14

Review time: 1 Hour

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish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	[Y] Yes [ ] No

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

SPECIFIC COMMENTS TO AUTHORS

1.The manuscript discussed clinical insignificant for current preoperative score of hepatocellular carcinoma. The C-index was 0.617, which was higher than the Tokyo score (0.613), the Taipei Integrated Scoring System (0.562), and equal to the value of the AJCC 8th (0.617).   The modified preoperative score provides an easier way to predict disease free survival for hepatocellular carcinoma patients with surgical resections. 2.The language quality in the manuscript is good. 3.Predictive modeling is a classic and the sample is large. However, some preoperative serological indicators were missing.

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish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	[ ] 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

The authors retrospectively analyzed 1106 patients with liver cancer who underwent liver resection at Chang Gung Memorial Hospital (CGMH) in Linkou from April 2003 to December 2012.), multiplicity, and radiographic total tumor volume (TTV) score, and compared with other scoring systems to provide a simpler method for patient survival prediction. In this article, a large number of risk factors for liver resection patients were analyzed, and statistical methods were used for clinical prediction.