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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

ESPS manuscript NO: 17417

Title: Efficacy of tolvaptan in patients with refractory ascites in a clinical setting

Reviewer's code: 01560464

Reviewer's country: China

Science editor: Xue-Mei Gong

Date sent for review: 2015-03-06 15:35

Date reviewed: 2015-04-17 10:54

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> [Y] Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> [Y] 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"/> [Y] No	<input type="checkbox"/> [] Minor revision
		BPG Search:	<input type="checkbox"/> [] Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> [Y] No	

COMMENTS TO AUTHORS

1) This clinical report showed that the clinical outcomes of tolvaptan (TLV) had significant meaning for the treatment of refractory ascites. This retrospective study served as a reference for using TLV in refractory ascites patients. 2) It is important guidance to clinical doctors to treat the refractory ascites. 3) It was not a randomized retrospective study, and the control group was not matched to the TLV group. The results had only important reference value.



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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

ESPS manuscript NO: 17417

Title: Efficacy of tolvaptan in patients with refractory ascites in a clinical setting

Reviewer's code: 00070481

Reviewer's country: China

Science editor: Xue-Mei Gong

Date sent for review: 2015-03-06 15:35

Date reviewed: 2015-04-14 22:33

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 type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input checked="" type="checkbox"/> Grade D: Fair	<input checked="" 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

The authors observed the effect of the tolvaptan to the refractory ascites.



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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

ESPS manuscript NO: 17417

Title: Efficacy of tolvaptan in patients with refractory ascites in a clinical setting

Reviewer's code: 00002314

Reviewer's country: Italy

Science editor: Xue-Mei Gong

Date sent for review: 2015-03-06 15:35

Date reviewed: 2015-03-10 16:52

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 type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input checked="" type="checkbox"/> Rejection
<input checked="" type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		[Y] No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		[Y] No	

COMMENTS TO AUTHORS

Although this is an interesting topic, in my opinion the main limitations of the study (observational, retrospective, unmatched, limited number of subjects) although briefly acknowledged in the discussion, do not allow to accept the conclusions on efficacy and safety of tolvaptan. Also the distinction between "effective" and "ineffective" patients is misleading.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

ESPS manuscript NO: 17417

Title: Efficacy of tolvaptan in patients with refractory ascites in a clinical setting

Reviewer's code: 02942902

Reviewer's country: Japan

Science editor: Xue-Mei Gong

Date sent for review: 2015-03-06 15:35

Date reviewed: 2015-03-17 17:40

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

In the present study, a total of 120 patients with refractory ascites were enrolled, and the clinical effects of a new diuretics (tolvaptan: TLV) were evaluated. Ascitic fluid collection is one of important complications in decompensated cirrhotic patients, and the current study would be therefore important for physicians. I consider the paper is interesting, but I have some comments. Major Comments: 1) As the authors mentioned, the effect of TLV is considered to be closely associated with serum creatinine levels. However, the creatinine level was not related to the treatment efficacy (Tables 3 and 5). They should discuss why the discrepancy was observed. In addition, they also discuss why TLV was effective in HCV-related cirrhosis (Table 5). 2) ROC analyses Regarding Figure 4A, they mentioned that their optimal cut-off value showed 89.5% sensitivity and 59.1% specificity. However, based on the diagonal line, the cut-off value seems to be determined at the point which provides about 85% sensitivity and 80% specificity. Also, it is very difficult how their cut-off value which showed 84.2% sensitivity and 81.8% specificity was determined (I feel the diagonal line in Figure 4B showed that optimal cut-off point would provide about 90% sensitivity and 60% specificity). Please indicate how they determined the cut-off values.



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Minor Comments: The style of the paper does not adhere to the instructions of the journal. For instance, the instructions to authors described that "Manuscripts should be typed in 1.5 line spacing and 12 pt. Book Antiqua with ample margins." Please prepare the manuscript according to the journal's regulations.