

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

ESPS manuscript NO: 17205

Title: Second line systemic therapies for hepatocellular carcinoma: Reasons for the failure

Reviewer's code: 00070845

Reviewer's country: United States

Science editor: Fang-Fang Ji

Date sent for review: 2015-02-25 20:17

Date reviewed: 2015-05-28 11:31

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input checked="" 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 type="checkbox"/> Rejection
<input 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

This is well written. I would add your own thoughts as to what is next. Trials utilizing personalized genetic profiles ? I would reference and briefly clarify BCLC for readers accustomed to other classifications. I would also mention the futility of any treatment in those with high CPT scores.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

ESPS manuscript NO: 17205

Title: Second line systemic therapies for hepatocellular carcinoma: Reasons for the failure

Reviewer's code: 00069630

Reviewer's country: China

Science editor: Fang-Fang Ji

Date sent for review: 2015-02-25 20:17

Date reviewed: 2015-05-19 09:15

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"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input 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

So far sorafenib is still the only recommendation means for advanced stage patients in BCLC system, which is supported by the grade 1a evidence of EBM. In view of the limitations of AEs and efficacy of sorafenib, more other molecular targeted drugs were applied into trials. Unfortunately, to date, no better drugs were found. The authors reviewed a series of related trials in recent 7 years and focused on analyzing the reason of failure. Importantly, they pointed out the design limitation of the head-to-head test and prognostic heterogeneity in patients who fail to the therapy of sorafenib. It may be the main reason for the failure of second-line treatment. Furthermore, they predict the future feasible solutions such as hierarchical design of second-line trials, genetic signature and expectations therapy. The authors provide us comprehensive understanding and in-depth analysis in this field. It is of great interest and significance either for basic researchers or for clinicians. It is an extremely valuable article. I proposed to priority publishing.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

ESPS manuscript NO: 17205

Title: Second line systemic therapies for hepatocellular carcinoma: Reasons for the failure

Reviewer's code: 02445428

Reviewer's country: Taiwan

Science editor: Fang-Fang Ji

Date sent for review: 2015-02-25 20:17

Date reviewed: 2015-05-20 10:49

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input checked="" 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 type="checkbox"/> Rejection
<input 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

The authors comment on a difficult situation in the management of HCC. All of the second-line trial fail for patients with tumor progression on sorafenib. The manuscript is well-written. However, the authors do not propose their own recommendations, either for clinical practice or for the design of future second-line clinical trial. Though the authors briefly mention genetic signature can be incorporated in future clinical trial, the statement is vague and not clear. Can the authors add a paragraph to express their recommendation?