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ESPS PEER-REVIEW REPORT

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| 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 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 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 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

This study is a review article showing types of biliary complication after liver transplantation, how to diagnose the complication, and how to manage them. The present study is well written and therefore readers will enjoy this article; however, I would like to raise some critical points. Minor: 1. I suggest you change the title, because the title in the original manuscript does not seem to reflect the content appropriately. 2. "Diagnosis" section, line 16-18 (Recently, magnetic resonance cholangiography is the first,,) , you might want to cite previous articles. 3. Authors should describe "Conclusion" at the end of article. 4. I think that figures in the original manuscript might not add any useful information to this article. Instead, I suggest you summarize previous studies in the light of risk factors of biliary complication and/or the frequency of complications.