



BAISHIDENG PUBLISHING GROUP INC

8226 Regency Drive, Pleasanton, CA 94588, USA

Telephone: +1-925-223-8242

Fax: +1-925-223-8243

E-mail: bpgoffice@wjgnet.com

http://www.wjgnet.com

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

ESPS manuscript NO: 13804

Title: Disease Control with Sunitinib in Advanced Intrahepatic Cholangiocarcinoma Resistant to Gemcitabine-oxaliplatin Chemotherapy

Reviewer's code: 00106404

Reviewer's country: Germany

Science editor: Xue-Mei Gong

Date sent for review: 2014-09-02 20:53

Date reviewed: 2014-10-24 17:43

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	PubMed 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 checked="" 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

Ms. Title: Disease Control with Sunitinib in Advanced Intrahepatic Cholangiocarcinoma Resistant to Gemcitabine-oxaliplatin Chemotherapy. Authors: Chantal Dreyer and co-workers The authors report their experience with three cases of sunitinib treatment for progressive cholangiocarcinoma. This tumor is difficult to treat and the observation of the authors could be of interest. The following points should be taken into consideration during possible revision: 1) Two/three patients were lost to follow-up. This limits the interpretability of the observations. Why was it impossible to get information on the further course. 2) Was none of the patients a candidate for liver transplantation? 3) The authors should state whether further patients with cholangiocarcinoma weretreated with sunitinib at their institution. 4) The authors should cite the following article: Sweeney CJ, Chiorean EG, Verschraegen CF, Lee FC, Jones S, Royce M, Tye L, Liau KF, Bello A, Chao R, Burris HA. A phase I study of sunitinib plus capecitabine in patients with advanced solid tumors. *J Clin Oncol.* 2010 Oct 10;28(29):4513-20.



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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

ESPS manuscript NO: 13804

Title: Disease Control with Sunitinib in Advanced Intrahepatic Cholangiocarcinoma Resistant to Gemcitabine-oxaliplatin Chemotherapy

Reviewer's code: 02510721

Reviewer's country: Italy

Science editor: Xue-Mei Gong

Date sent for review: 2014-09-02 20:53

Date reviewed: 2014-11-14 18:07

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	PubMed Search:	<input checked="" 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 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"/> No	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		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 paper shows the employment of sunitinib in 3 patients with advanced intrahepatic cholangiocarcinoma progressive after standard chemotherapy. The results of this therapy in the advanced neoplastic disease are well demonstrated in each case reported. The discussion treats many points of view about the second-line chemotherapy and in particular the control of angiogenesis of tumor with the use of anti-angiogenic therapy. In conclusion the paper plays the role of precursor study for a prospective multicenter phase II trial with the sunitinib.



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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

ESPS manuscript NO: 13804

Title: Disease Control with Sunitinib in Advanced Intrahepatic Cholangiocarcinoma Resistant to Gemcitabine-oxaliplatin Chemotherapy

Reviewer's code: 01560081

Reviewer's country: China

Science editor: Xue-Mei Gong

Date sent for review: 2014-09-02 20:53

Date reviewed: 2014-11-15 15:34

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	PubMed 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 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

The authors reported three advanced intrahepatic cholangiocarcinoma patients treated with sunitinib. In these three patients only two of them were followed to death or more than 5 years. Although the medicine showed a benefit result in all of the patients after treatment, the during of follow up were too short to make a conclusion for clinical research. If more patients could be included in the study, the manuscript would be convincing.



ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

ESPS manuscript NO: 13804

Title: Disease Control with Sunitinib in Advanced Intrahepatic Cholangiocarcinoma Resistant to Gemcitabine-oxaliplatin Chemotherapy

Reviewer’s code: 02730861

Reviewer’s country: Japan

Science editor: Xue-Mei Gong

Date sent for review: 2014-09-02 20:53

Date reviewed: 2014-11-23 13:45

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	PubMed 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"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
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		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		[Y] No	

COMMENTS TO AUTHORS

For Authors: While cholangiocarcinoma is the second-most common primary hepatic tumor after hepatocellular carcinoma (HCC), it is a rare disease, and the only curative treatment is surgical resection. Resectable cholangiocarcinoma is associated with frequent recurrence and a five-year survival rate of 20-40% following surgery, and when disease recurs, treatment with gemcitabine plus cisplatin is first-line therapy. However, there is currently no consensus on the best treatment option for patients presenting with disease progression following first-line therapy. The manuscript by Dreyer C. et al. described three cases of disease control with sunitinib in advanced intrahepatic cholangiocarcinoma resistant to gemcitabine-oxaliplatin chemotherapy. Angiogenesis and the expression of pro-angiogenic factors, such as vascular endothelial growth factor (VEGF) and platelet-derived growth factor (PDGF) play an important role in the pathogenesis of biliary tract cancers including cholangiocarcinoma, and therefore they applied sunitinib to treatment for recurrent cholangiocarcinoma resistant to gemcitabine-oxaliplatin chemotherapy. They showed promising results under therapy with sunitinib for recurrent intrahepatic cholangiocarcinoma. This paper is



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worth to be published in World Journal of Hepatology because it is innovative that sunitinib were used for recurrent cholangiocarcinoma resistant to gemcitabine-oxaliplatin chemotherapy in the clinical setting. The authors need to describe about the mechanism and side effect of sunitinib which they used in more detail for clinical use of this agent. Major compulsory revisions: 1. The authors need to describe about the mechanism and side effect of sunitinib which they used in more detail for clinical use of this agent.