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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

ESPS manuscript NO: 24641

Title: Transarterial radioembolization vs chemoembolization for hepatocarcinoma patients: A systematic review and meta-analysis

Reviewer's code: 02444774

Reviewer's country: China

Science editor: Xue-Mei Gong

Date sent for review: 2016-01-30 16:01

Date reviewed: 2016-02-20 07:45

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 checked="" type="checkbox"/> Grade B: Very good	<input checked="" 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"/> 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 meta-analysis aimed to compare the efficacy and safety of Y-90 transarterial radioembolization (Y90RE) and transarterial chemoembolization (TACE) in hepatocellular carcinoma (HCC). The analysis was well performed. Comments: 1. A table summarizing the clinical characteristics of the 10 studies included would be useful. 2. Is it possible to identify what type of patients would benefit more from Y90RE or TACE?



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Name of journal: World Journal of Hepatology

ESPS manuscript NO: 24641

Title: Transarterial radioembolization vs chemoembolization for hepatocarcinoma patients: A systematic review and meta-analysis

Reviewer's code: 02822399

Reviewer's country: United States

Science editor: Xue-Mei Gong

Date sent for review: 2016-01-30 16:01

Date reviewed: 2016-03-23 18:22

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"/> 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 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

Facciorusso and colleagues compared the efficacy and safety of Y90RE and TACE in HCC patients. Comments: 1. The quality of figures are poor. Figures 2,4,5 and 6 are actually tables not figures. 2. The review needs more details about the effect of Y90RE and TACE on different classes of HCC patients.



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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

ESPS manuscript NO: 24641

Title: Transarterial radioembolization vs chemoembolization for hepatocarcinoma patients: A systematic review and meta-analysis

Reviewer's code: 01328488

Reviewer's country: Netherlands

Science editor: Xue-Mei Gong

Date sent for review: 2016-01-30 16:01

Date reviewed: 2016-02-09 17:58

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 type="checkbox"/> Rejection
<input checked="" type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> Plagiarism	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Major revision
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		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

A good attempt to shed light onto which modality could possibly be preferred. However based upon a lack of properly conducted randomized prospective trials, this question currently cannot be answered adequately. Discussion response rates probably does not make sense, I should delete this paragraph, whereas it is unfortunate that no relevant information re toxicity or QoL could be retrieved from the retrospective datasets.