

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

ESPS manuscript NO: 28713

Title: RESECTION MARGIN INFLUENCES THE OUTCOME OF PATIENTS WITH BILOBAR COLORECTAL LIVER METASTASES IN AN ERA OF MULTI-DISCIPLINARY THERAPY

Reviewer's code: 03646516

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Science editor: Yuan Qi

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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

This article is interesting but I think epidemiological data are more interesting than univariate and multivariate analysis, which is the part highlighted by the authors. Structure of the manuscript is correct. The message of this article is not very clear. It missed something important to hold about this article. But the content of the manuscript have value for publication all the same. It is unclear why the non-operated but down staging patients, have not been finally operated. What are the criteria used ? It lacks a clear table of epidemiological characteristics of all patients. To add an overall survival curve of all patients and the number of > 5 years survivors would be interesting. The survival curve could show too : operated patients, down staging patients, inoperable patients. Maybe it would be interesting to look precisely risk factors to lead to operate patients ? Data on treatment (chemotherapy) are not clear enough. Discussion provides interesting insights into article's outcome. Strengths and limitations of this study are not expressed by the authors. I find some english mistakes...