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ESPS Peer-review Report

Name of Journal: World Journal of Radiology

ESPS Manuscript NO: 5263

Title: Treatment of metastatic liver tumors using stereotactic ablative radiotherapy (SABR)

Reviewer code: 02510166

Science editor: Cui, Xue-Mei

Date sent for review: 2013-08-26 14:32

Date reviewed: 2013-09-26 07:08

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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"/> Existed	<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"/> No records	<input type="checkbox"/> Rejection
<input checked="" type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	BPG Search:	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

The manuscript is excellently written. It is however insufficient in its current form. When reading a review, I expect a discussing summary with clear take home messages: 1) Is the therapy advisable outside clinical trial or not? 2) How do they select their patients? 3) what are the caveats that the authors convey to their patients? 4) what technique, what type of schedule they recommend? Without a clear statement, the review is no more than a bundle of studies piled up one on another. Table 2 is nice, but without a discussing proposal, it is no more helpful than downloading abstracts from Pubmed. Do the authors pick haphazardly one of Table 2's columns and apply it to their patients? Do they recommend to arbitrarily pick one "indication" from Table 2, one day one set of "indications", the next day another set of "indications"? A paragraph stating their choice and discussing what they consider the most reasonable option should be provided. Besides the take home message, there is an important reason why a "best" option should be explicitly recommended by the authors. It is not realistic to design a trial comparing non-ablative therapy versus the 8 alternatives of Table 2. A choice needs to be made. A minor point: the presented therapy schedules include only up to 5 fractions. Treatments with more fractions are excluded. What is the rationale of limiting ablative RT to few fractions? Is there ground to argue that higher doses with more fractions are non ablative?



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ESPS Peer-review Report

Name of Journal: World Journal of Radiology

ESPS Manuscript NO: 5263

Title: Treatment of metastatic liver tumors using stereotactic ablative radiotherapy (SABR)

Reviewer code: 02451558

Science editor: Cui, Xue-Mei

Date sent for review: 2013-08-26 14:32

Date reviewed: 2013-09-29 15:25

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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"/> Existed	<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"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	BPG Search:	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

This review summarizes the current evidence supporting liver stereotactic ablative radiotherapy (SABR) with particular attention given to patient selection, target delineation, organ at risk dose volume constraints, response evaluation imaging and the various SABR techniques for delivering ablative radiotherapy to the liver. They concluded that Stereotactic ablative body radiotherapy is a well tolerated and effective therapy for patients with liver metastasis who are not suitable candidates for resection. It is well written and could provide some important information for clinical therapy.



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ESPS Peer-review Report

Name of Journal: World Journal of Radiology

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Title: Treatment of metastatic liver tumors using stereotactic ablative radiotherapy (SABR)

Reviewer code: 00742250

Science editor: Cui, Xue-Mei

Date sent for review: 2013-08-26 14:32

Date reviewed: 2013-10-09 12:24

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input checked="" type="checkbox"/> Grade A: Priority Publishing	Google 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"/> Existed	<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"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

This review article has a high scientific value to be published in World Journal of radiology. It is well written and there are no concerns. "Table showing" of Table 1 and 2 should be deleted.