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# PEER-REVIEW REPORT

**Name of journal:** World Journal of Transplantation

**Manuscript NO:** 65129

**Title:** Pediatric metabolic liver diseases: Evolving role of liver transplantation

**Reviewer's code:** 03576153
**Position:** Peer Reviewer
**Academic degree:** PhD

**Professional title:** Professor

**Reviewer's Country/Territory:** Germany

**Author's Country/Territory:** India

**Manuscript submission date:** 2021-02-28

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-04-08 15:17

**Reviewer performed review:** 2021-04-12 13:19

**Review time:** 3 Days and 22 Hours

| | |
|---|---|
| **Scientific quality** | [ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good<br>[ ] Grade D: Fair [ ] Grade E: Do not publish |
| **Language quality** | [ ] Grade A: Priority publishing [Y] Grade B: Minor language polishing<br>[ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection |
| **Conclusion** | [ ] Accept (High priority) [ ] Accept (General priority)<br>[Y] Minor revision [ ] Major revision [ ] Rejection |
| **Re-review** | [Y] Yes [ ] No |
| **Peer-reviewer statements** | Peer-Review: [Y] Anonymous [ ] Onymous<br>Conflicts-of-Interest: [ ] Yes [Y] No |

## SPECIFIC COMMENTS TO AUTHORS

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With the current paper the authors summarized the role of liver transplantation for children suffering from metabolic liver diseases. The paper is well written and covers a very important aspect in pediatric liver transplantation. I have the following comments on the manuscript: 1. It would be helpful to include prevalences of the different metabolic diseases 2. Abstract: APOLT is not really a novel technique. It has been performed in some centers many years ago. 3. Alpha-1 antitrypsin deficiency: I do not aggree that „serum levels of A1AT may not help in diagnosis as it is an acute phase reactant….“. Only homozygous patients are candidates for liver transplantation and they all have definetely serum levels below 30 mg/dl. So the diagnosis in homozygous patients can be established just by determining the serum level. 4. Why ist he risk for hepatic artery thrombosis and IgA nephropathy increased in children with AATD post Ltx? 5. Primary hyperoxaluria: It should be mentioned that there is a new medical treatment option (LUMASIRAN) 6. Maple Syrup Unine Disease: Domino-Tx should be diskussed in more detail 7. Auxilliary Partial Liver Transplantation (APOLT): The heterotopic technique should also be discussed (Pros and Cons)