



**Baishideng
Publishing
Group**

7041 Koll Center Parkway, Suite
160, Pleasanton, CA 94566, USA
Telephone: +1-925-399-1568
E-mail: bpgoffice@wjgnet.com
https://www.wjgnet.com

SPECIFIC COMMENTS TO AUTHORS

Comments to the authors The article with the title “Imaging evaluation of the liver in oncology patients: a comparison of techniques” is in generally well done, but I would offer these comments to the investigators: 1) There are some minor language errors. 2) There are some minor grammatical errors. 3) Liver-specific contrast agents for the evaluation of liver parenchymal lesion are recommended to be more extensively presented. 4) Newer references should be used. 5) The modes of US (2d/3d/4d) should be referred and compared to each other.

1. The manuscript was further edited and later proofread several times by all authors who have proficiency in English.
2. Responded above (#1)
3. In the MRI section of the manuscript (2.3), we added a paragraph regarding liver-specific contrast agents to evaluate liver lesions. In this manuscript, we included new references relevant to the topic (from 2017 and 2020).
4. From the references in the manuscript, 22 are from the past three years (1-2021; 9-2020; 6-2019; 6-2018).
5. In the Ultrasound section of the manuscript (2.1), we added a new paragraph regarding the US modes and comparison between them, as suggested.



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Review article titled “Imaging evaluation of the liver in oncology patients: a comparison of techniques” In this review, authors indicated that this study aimed to briefly review each of the imaging techniques and subsequently compare them in assessing liver metastases, including detection, characterization, diagnosis, and treatment response evaluation. However, for me isn’t clear that how authors selected articles that were included in this review. What criteria of inclusion and exclusion were followed by authors to collect articles to make a comparison? Since the study is comparative, I recommend that authors should follow the Prisma recommendation (for example <https://link.springer.com/article/10.1245/s10434-020-09365-x>). Hence, it’s important in the manuscript text (in the methods section) to provide information regarding article searching strategies, searching years, MeSH keywords, and databases that were used. Also, there are many figures in this review, and I think authors should reassess the necessity of adding all these figures. As for me instead of adding a lot of figures inclusion a table that can demonstrate an analysis of articles with different imaging techniques will be more informative.

- 1) This invited mini-review does not assume that we perform a systematic review or a meta-analysis. Instead, we intended to provide a didactic and updated perspective of the role of different imaging modalities in clinical practice. Nevertheless, we performed a comprehensive search based on Pubmed and EMBASE to identify the most relevant and latest literature (searching years: 1998 - 2021).
- 2) The MeSH keywords were considered as the following: “liver metastases, magnetic resonance imaging, computed tomography, oncology; ultrasound,



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contrast media, neoplasm staging”

- 3) The article selection for the manuscript first focused on the broad spectrum of liver metastases in different imaging techniques (US; CT; DE-CT; MRI; PET-CT; PET-MRI), further specifying characteristic attributes of each imaging modality, show most relevant in the daily practice for the evaluation and follow-up of liver metastases, through several recent studies, systematic reviews, and updated ESMO and NCCN guidelines.
- 4) We agree with the reviewer; however, since this is an online journal with no limits on figures, we believe that for this manuscript, the images are beneficial to illustrate the manuscript and, thus, providing a pictorial review of specific imaging findings.
- 5) We added a table as requested.