



PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 60554

Title: Intrahepatic cholangiocarcinoma (ICC) is more complex than we thought

Reviewer's code: 03473431

Position: Editorial Board

Academic degree: MD

Professional title: Director, Chief Doctor

Reviewer's Country/Territory: Italy

Author's Country/Territory: China

Manuscript submission date: 2020-11-09

Reviewer chosen by: Pan Huang

Reviewer accepted review: 2020-11-20 11:29

Reviewer performed review: 2020-11-22 18:56

Review time: 2 Days and 7 Hours

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 Grade E: Do not publish |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



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SPECIFIC COMMENTS TO AUTHORS

The case is very interesting but some major changes are needed. Abstract section: 1)line 30:"than 40 cases have been described in the literature to date" this phrase should be moved in the introduction section, 2)line 32:"Tumor markers were normal. Serological analysis indicated absence of hepatitis virus." this phrase should be moved after "Abdominal computed tomography showed a lesion in the left lobe of the liver. furthermore indicate the size and the segment of the nodule. 3)line 37:the size of the brain nodule should be reported. 4)line 37:I do not understand this statement! In the abstract should be reported as diagnosis was obtained!!! CASE presentation section 1)line 70a"abdominal computed tomography": please add " with contrast media and describe the vascular findings of the liver lesion,the size and the segment location:the vascular findings should be reported also in the legend of figures regarding the CT examination.The same is due for the vascular characteristic of the brain lesion. 2) indicate the type of biopsy of the liver lesion:cutting needle and what gauge. 3)line 76:again !authors should describe the result of the liver biopsy ,report the type of ICC (if obtained with biopsy and, anyway indicated after the surgical operation) and hypothesize the presence of the brain nodule as a possible metastasis of the ICC. reference section references should be changed according to the standard of the Journal



PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 60554

Title: Intrahepatic cholangiocarcinoma (ICC) is more complex than we thought

Reviewer's code: 03475479

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Lecturer

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2020-11-09

Reviewer chosen by: Pan Huang

Reviewer accepted review: 2020-11-21 22:57

Reviewer performed review: 2020-11-23 01:42

Review time: 1 Day and 2 Hours

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|---------------------------------|---|
| Scientific quality | <input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish |
| Language quality | <input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection |
| Conclusion | <input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection |
| Re-review | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
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SPECIFIC COMMENTS TO AUTHORS

Authors showed a case of ICC diagnosed with synchronous brain metastasis. The case was treated with surgical resection and systemic chemotherapy, and the clinical course was very good. This case was interesting, but several issues should be addressed. 1. First, the private information of the patient was found in Fig. 1. It should be deleted immediately. 2. The standard chemotherapy for ICC is GEM+CDDP. Authors should describe or discuss the reason why GEM+S1 is selected in present case. 3. The pathway of metastasis to brain should be discussed. In present case, no LN metastases were found. Authors should show and discuss the histopathological findings of primary lesion more detail. 4. Authors should describe neurological findings of the patient after surgical resection.



PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 60554

Title: Intrahepatic cholangiocarcinoma (ICC) is more complex than we thought

Reviewer's code: 01560036

Position: Peer Reviewer

Academic degree: DSc, MD

Professional title: Professor

Reviewer's Country/Territory: Russia

Author's Country/Territory: China

Manuscript submission date: 2020-11-09

Reviewer chosen by: Pan Huang

Reviewer accepted review: 2020-11-23 06:45

Reviewer performed review: 2020-11-23 06:49

Review time: 1 Hour

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



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SPECIFIC COMMENTS TO AUTHORS

nice and interesting case reprot



RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 60554

Title: Intrahepatic cholangiocarcinoma (ICC) is more complex than we thought

Reviewer's code: 03475479

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Lecturer

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2020-11-09

Reviewer chosen by: Jia-Ru Fan

Reviewer accepted review: 2020-12-16 03:22

Reviewer performed review: 2020-12-16 06:21

Review time: 2 Hours

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|---------------------------------|---|
| Scientific quality | <input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish |
| Language quality | <input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection |
| Conclusion | <input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection |
| Peer-reviewer statements | Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

SPECIFIC COMMENTS TO AUTHORS

Revised manuscript was well-written. Several issues should be clarified before



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publication. 1. Post operation period should be clarified (33 or 39 months). 2. The reason of decision by MDT should be shown (the indication of operation, the selection and the timing of chemotherapy).