



Baishideng Publishing Group Co., Limited

Flat C, 23/F., Lucky Plaza,
315-321 Lockhart Road,
Wan Chai, Hong Kong, China

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 4681

Title: Routine Lymph node dissections is not suitable for all the intrahepatic cholangiocarcinoma patients: Results of a monocentric series

Reviewer code: 00070900

Science editor: Wen, Ling-Ling

Date sent for review: 2013-07-15 15:47

Date reviewed: 2013-07-27 20:49

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> [Y] Accept
<input type="checkbox"/> [Y] Grade B (Very good)	<input type="checkbox"/> [Y] 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	BPG Search:	<input 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 authors investigated the benefit of lymph node dissection (LND) in the patients with intrahepatic cholangiocarcinoma (ICC). The impact on survival and disease free survival of LND during primary resection was analyzed. They concluded that ICC patients without lymph node involvement and patients with multiple tumors and lymph node metastases may not benefit from aggressive lymphadenectomy, so routine LND should be considered with discretion. This study design is appropriate and the conclusion is reasonable. The paper is also well documented. However, there are some defects (described below) in this article. 1. The title should be "Routine lymph node dissections may be not suitable for all the intrahepatic cholangiocarcinoma patients: results of a monocentric series". 2. There are stylistic or other errors throughout the manuscript. For example: Page 3, the sentence of the second paragraph (lines 11 and 12): "It is important to define the role of LND because it is a modi?able factor by a surgeon during hepatic resection. But no clear guidelines yet exist. →.... It is important to define the role of LND because it is a modi?able factor by a surgeon during hepatic resection, but no clear guidelines yet exist". Page 6, line 7: X2→...χ2 Page 6, line 12: Clinicopathological patient characteristics → Clinicopathological characteristics Page 6, the sentence of the last paragraph (lines 20 and 21): "59 minor resection. →... 59 patients underwent minor resection". I recommend that the authors meticulously check the manuscript before resubmission. 3. Which edition of AJCC/UICC did the author use in the article?



Baishideng Publishing Group Co., Limited

Flat C, 23/F., Lucky Plaza,
315-321 Lockhart Road,
Wan Chai, Hong Kong, China

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 4681

Title: Routine Lymph node dissections is not suitable for all the intrahepatic cholangiocarcinoma patients: Results of a monocentric series

Reviewer code: 00503432

Science editor: Wen, Ling-Ling

Date sent for review: 2013-07-15 15:47

Date reviewed: 2013-08-23 01:59

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

COMMENTS TO AUTHORS

The authors 124 ICC patients who had undergone surgical resection of ICC from January 2006 to December 2007 were assessed and the impact on survival of LND during primary resection was analyzed. They concluded that ICC patients without lymph node involvement and patients with multiple tumors and lymph node metastases may not benefit from aggressive lymphadenectomy. Routine LND should be considered with discretion The study is interesting but some points: 1.

Did they perform lymphoscintigraphy (radionuclide , dye,...) to find sentinel node in these cases ? 2. Add a table in the discussion section including previous studies characteristics such as year of publication, types of lymphoscintigraphy, number of cases,



Baishideng Publishing Group Co., Limited

Flat C, 23/F., Lucky Plaza,
315-321 Lockhart Road,
Wan Chai, Hong Kong, China

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 4681

Title: Routine Lymph node dissections is not suitable for all the intrahepatic cholangiocarcinoma patients: Results of a monocentric series

Reviewer code: 02510166

Science editor: Wen, Ling-Ling

Date sent for review: 2013-07-15 15:47

Date reviewed: 2013-08-26 04:55

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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 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

Comments on: "Routine Lymph node dissections is not suitable for all the intrahepatic cholangiocarcinoma patients: Results of a monocentric series". It is a well written manuscript that addresses an interesting topic. It also provides useful data on recurrences. I find however that it is missing two big pieces. 1) There are two main groups, those patients who did not undergo surgery of lymph nodes, and those patients who did undergo node dissection. The authors do not present the full comparison between these two groups. Instead, the manuscript immediately jumps into a selective comparison of LND(-) vs. LND(+)LN(-), skipping the comparison of LND(-) vs. LND(+). 2) The second missing piece is a multivariate regression analysis. This is a retrospective study. It would be worthwhile to try to adjust against possible confounding factors in a multivariate table. Minor remark: Table 1 mentions various sectionectomies. I believe that the paragraph on surgical procedure should give some brief explanation.



Baishideng Publishing Group Co., Limited

Flat C, 23/F., Lucky Plaza,
315-321 Lockhart Road,
Wan Chai, Hong Kong, China

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 4681

Title: Routine Lymph node dissections is not suitable for all the intrahepatic cholangiocarcinoma patients: Results of a monocentric series

Reviewer code: 02441744

Science editor: Wen, Ling-Ling

Date sent for review: 2013-07-15 15:47

Date reviewed: 2013-08-28 17:42

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 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)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

Interesting study. Well written and conducted.