PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Surgery
Manuscript NO: 72677
Title: Laparoscopic vs open liver re-resection for cirrhotic patients with post-hepatectomy hepatocellular carcinoma recurrence: A comparative study
Provenance and peer review: Invited Manuscript; Externally peer reviewed
Peer-review model: Single blind
Reviewer’s code: 06178626
Position: Peer Reviewer
Academic degree: MD
Professional title: Doctor
Reviewer’s Country/Territory: Italy
Author’s Country/Territory: China
Manuscript submission date: 2021-12-30
Reviewer chosen by: AI Technique
Reviewer accepted review: 2021-12-30 20:23
Reviewer performed review: 2022-01-08 15:32
Review time: 8 Days and 19 Hours

<table>
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<tr>
<th>Scientific quality</th>
<th>[ ] Grade A: Excellent</th>
<th>[ ] Grade B: Very good</th>
<th>[ ] Grade C: Good</th>
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<td>[ ] Grade D: Fair</td>
<td>[ ] Grade E: Do not publish</td>
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<tr>
<td>Language quality</td>
<td>[ ] Grade A: Priority publishing</td>
<td>[ ] Grade B: Minor language polishing</td>
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<td>[ ] Grade C: A great deal of language polishing</td>
<td>[ ] Grade D: Rejection</td>
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<tr>
<td>Conclusion</td>
<td>[ ] Accept (High priority)</td>
<td>[ ] Accept (General priority)</td>
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<td>[ ] Minor revision</td>
<td>[ ] Major revision</td>
<td>[ ] Rejection</td>
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<tr>
<td>Re-review</td>
<td>[ ] Yes</td>
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SPECIFIC COMMENTS TO AUTHORS
The authors present an interesting retrospective comparative analysis study on short- and long-term outcomes of laparoscopic versus open liver re-resection for cirrhotic patients with post-hepatectomy HCC recurrence. I would like to congratulate for the presentation of the study, the methods and the results presented. This will make an important contribution for the assessment and the evaluation of the laparoscopic liver surgery even in the setting of cirrhotic patients with post-hepatectomy HCC recurrence. My comments below:

INTRODUCTION - The introduction is written clearly, concisely and is a good background to the study.

METHODS - The authors present a 15-year experience in open and laparoscopic liver surgery, on minor and major hepatectomies, of both anterior and posterior hepatic segments, focused on post-hepatectomy HCC recurrence in cirrhotic patients, although the sample of patients enrolled is not large. The description of the methods and the presentation of the tables are clear, precise and complete.

RESULTS - The authors present short-term results (hospitalization and blood loss) in favor of laparoscopic group, but no significant differences on long-term oncological outcomes between open and laparoscopic liver resections. The sample of patients enrolled is not large, but the authors describe well and honestly the 4 limitations of the study. On the other hand, the strong point is certainly a high criterion for selecting patients. It would be challenging to review future work with more patient enrollment.

DISCUSSION – The discussion is very interesting, not excessively long, focused on the aim of work.

CONCLUSIONS - The conclusions should be a summary of the highlights of the outcomes discussed in the manuscript and advice for readers who could benefit from the evidence in the literature in daily practice. Please improve the conclusions by
giving future insights to the readers. ABSTRACT - Please review the abstract as the significant results seems to be not in favor of the laparoscopic group. Finally, good and updated bibliography collected and good presentation of the paper.
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**Provenance and peer review:** Invited Manuscript; Externally peer reviewed  

**Peer-review model:** Single blind  

**Reviewer’s code:** 05424290  

**Position:** Editorial Board  

**Academic degree:** MBBS, MD  

**Professional title:** Academic Research, Doctor, Professor  

**Reviewer’s Country/Territory:** India  

**Author’s Country/Territory:** China  

**Manuscript submission date:** 2021-12-30  

**Reviewer chosen by:** AI Technique  

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**Review time:** 9 Days and 11 Hours  

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SPECIFIC COMMENTS TO AUTHORS
The study is a retrospective data analysis of laparoscopic liver re-resection versus open liver re-resection in patients with recurrent HCC. The study shows similar 1, 3, and 5-year overall and disease free survival in both the groups. Though the authors have already raised the issue of missing data, however, the cause of death in the patients with recurrent HCC would be interesting to note as re-resection in these patients would be challenging and would be another risk factor for development of liver related decompensations. They should also elaborate as to what were the criteria used to select a patient for open versus laparoscopic liver re-resection.