



BAISHIDENG PUBLISHING GROUP INC

7901 Stoneridge Drive, Suite 501, Pleasanton, CA 94588, USA

Telephone: +1-925-223-8242

Fax: +1-925-223-8243

E-mail: bpgoffice@wjgnet.com

http://www.wjgnet.com

PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

Manuscript NO: 34213

Title: Role of endoscopic ultrasound in liver disease: Where do we stand in 2017?

Reviewer's code: 02441041

Reviewer's country: Sweden

Science editor: Jin-Xin Kong

Date sent for review: 2017-04-10

Date reviewed: 2017-04-19

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<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"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> Plagiarism	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		[Y] No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		[Y] No	

COMMENTS TO AUTHORS

This review provides an interesting and thorough overview over the subject EUS in liver disease. It is clear and covering the subject in a systematic way. The authors could add a conclusion about the areas with the high potential to be implemented in routine clinical care in the future.



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PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

Manuscript NO: 34213

Title: Role of endoscopic ultrasound in liver disease: Where do we stand in 2017?

Reviewer's code: 03475240

Reviewer's country: Reviewer_Country

Science editor: Jin-Xin Kong

Date sent for review: 2017-04-10

Date reviewed: 2017-04-20

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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 checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

Congratulations on the work done for this review article. Good summary of the evidence in the literature to date. You mention "We have also summarized the future research on this subject" however there wasn't very much of that. Would be nice for you to comment on what you think the future directions should be as opposed to what the papers you have summarised suggested.

PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

Manuscript NO: 34213

Title: Role of endoscopic ultrasound in liver disease: Where do we stand in 2017?

Reviewer's code: 01467102

Reviewer's country: Reviewer_Country

Science editor: Jin-Xin Kong

Date sent for review: 2017-04-10

Date reviewed: 2017-04-21

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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 checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
	<input type="checkbox"/> Grade D: Rejected	BPG Search:	<input checked="" type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

A review on this subject is a good idea nevertheless there are some problems to be corrected : - a short introduction on EUS performances, limits and usual side effects is needed at the beginning - the order of the chapters is unclear. Or you delineate clearly diagnosis (including FNA) and therapy, or for every chapter you get two sub topics : diagnosis and therapy - in the same manner you must differentiate when the use of EUS can be applied in clinical practice and when the procedure is always experimental and must be performed in trials. - diagnosis of diffuse liver diseases by liver EUS-FNB is lacking - tables must be added when possible and text shortened (ex:results of EUS-FNA of focal hepatic lesions, drainage of liver abscesses ... - in the topic : diagnostic use of EUS in focal hepatic lesions * MRI and PETscan must be cited and a table comparing the different exams and their performances included. *Add the reference : EUS-derived criteria for distinguishing benign from malignant metastatic solid hepatic masses. Fujii-Lau LL, et al Gastrointest Endosc 2015;81(5):1188-1196. *table about complications of EUS-FNA vs transcutaneous approach - it seems that some page are



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lacking ? or there is no conclusion ...? - in all the topics the author must underlined if EUS diagnosis or therapy has a real future or will only remain an exceptional way to diagnose or treat the problem. - What is considered as the future research (other applications or development of applications) must be clearly identified before the conclusion

PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

Manuscript NO: 34213

Title: Role of endoscopic ultrasound in liver disease: Where do we stand in 2017?

Reviewer's code: 02546581

Reviewer's country: Germany

Science editor: Jin-Xin Kong

Date sent for review: 2017-04-10

Date reviewed: 2017-04-25

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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"/> The same title	<input type="checkbox"/> High priority for publication
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		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

In this review manuscript, the authors evaluated the current role of EUS in liver disease. The manuscript investigates the diagnostic and therapeutic role of EUS in liver biopsy, focal hepatic lesions, portal hypertension, liver abscess and hepatic cysts. In the context of focal hepatic lesions, the sensitivity of EUS was compared to the sensitivity of CT-Scan. The advantages of EUS are shown sufficiently based on the data presented. - However, the informative value is limited by the fact, that underlying studies are old and the technological progress have not been taking into account. Current studies, e.g. „Applications of contrast-enhanced harmonic endoscopic ultrasound on biliary, focal liver lesions and vascular diseases“, published in Endosc Ultrasound Jan 2017, should be discussed. The superiority auf EUS-FNA in the diagnostic of focal hepatic lesions is sufficiently presented. Whereas the variety of major-complications should be explained in more detail, particularly with regard to gastric and duodenal perforations. The advantages over non-invasive methods should be highlighted. - The authors provide an overview of therapeutic use of EUS guided FNA. The EUS guided ethanol lavage is



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presented as promising approach in the therapy of simple hepatic cysts. The statement is based on a single center retrospective cohort study, that leads to methodological weaknesses. Only Seventeen patients with 19 hepatic cysts were enrolled. This should be discussed more critically in the discussion part. - The conclusions concerning the EUS guides drainage of liver abscess and portal hypertension are drawn appropriately based on the available literature. The fact, that EUS could be used for creation of an intra-hepatic portosystemic shunt is an innovative outlook. - The authors should include tables summarizing the described studies. - This is an interesting review manuscript, well written and the most recent findings of EUS in liver diseases are well discussed. Thus, the manuscript should be accepted after minor revisions.