

**Review Form 3**

Journal Name:	<a href="#">Asian Journal of Pediatric Research</a>
Manuscript Number:	Ms_AJPR_126688
Title of the Manuscript:	Effectiveness of Roux-en-Y hepaticojejunostomy in reversing the liver histological changes in patients presenting symptomatically and asymptotically with type I & IV choledochal cyst.
Type of the Article	Original Research Article

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**PART 1: Review Comments**

<b>Compulsory</b> REVISION comments	Reviewer's comment	<b>Author's Feedback</b> (Please correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
Please write a few sentences regarding the importance of this manuscript for the scientific community. Why do you like (or dislike) this manuscript? A minimum of 3-4 sentences may be required for this part.	As it is well known, even if a choledochal cyst is excised, the malignancy risk is still present. The article provides a perspective on liver histological changes after 6 months. In those patients with irreversible changes, follow-up should be emphasized even more compared to those with reversible changes, to rule out the occurrence of malignancy in the future.	
Is the title of the article suitable? (If not please suggest an alternative title)	Yes, it is suitable. Although, I did not read in any part of the manuscript if the surgical procedure has a percentage of effectiveness, but it could be added at the conclusion. Some other suitable titles would be: "Histological Response to Roux-en-Y Hepaticojejunostomy in Symptomatic and Asymptomatic Choledochal Cyst Cases (Type I & IV)"  Or  "Impact of Roux-en-Y Hepaticojejunostomy on Liver Histological Changes in Symptomatic and Asymptomatic Patients with Type I & IV Choledochal Cysts"	
Is the abstract of the article comprehensive? Do you suggest the addition (or deletion) of some points in this section? Please write your suggestions here.	Yes, it is comprehensive. I would suggest adding explicitly that the follow up biopsy was made in a minimally invasive manner (percutaneous liver biopsy).	
Are subsections and structure of the manuscript appropriate?	Yes, they are.	
Please write a few sentences regarding the scientific correctness of this manuscript. Why do you think that this manuscript is scientifically robust and technically sound? A minimum of 3-4 sentences may be required for this part.	This manuscript seems to be scientifically robust and technically sound due to several key factors. Firstly, it addresses a significant clinical question regarding the reversibility of liver histological changes in choledochal cyst patients, a topic with implications for patient management and treatment timing. The study's prospective design minimizes data loss and strengthens the reliability of findings. The use of both pre- and post-operative liver biopsies provides direct evidence of histopathological changes, enabling an objective assessment of reversibility. The study's methodology is detailed and standardized; all histopathological analyses were conducted by a single pathologist, reducing inter-observer variability, and liver biopsies were consistently performed by a single radiologist, ensuring procedural uniformity. Statistical analysis using SPSS further supports the rigor of the conclusions. Finally, the study's inclusion criteria and controlled variables (such as patient exclusion for known liver disease) enhance the scientific accuracy by reducing confounding factors. Although, it can also be expanded, like	
Are the references sufficient and recent? If you have suggestions of additional references, please mention them in the review form. :	Yes, they are sufficient and recent (for what it is, as there is not a lot of articles regarding this topic).  I would suggest reading this article: Liver Histopathology in Pediatric Patients with Choledochal Cyst: <a href="https://journals.lww.com/jiap/fulltext/2024/29030/liver_histopathology_in_pediatric_patients_wit_h.5.aspx">https://journals.lww.com/jiap/fulltext/2024/29030/liver_histopathology_in_pediatric_patients_wit_h.5.aspx</a>  Mayank et al, described the association of symptoms with liver fibrosis. This is important, as patients who presented with jaundice showed grade 3 and grade 4 liver fibrosis. Also, the type	

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	<p>of cyst seems to be of noteworthiness, as the histological changes may vary from one type of cyst to another, even after surgical excision.</p> <p><b>A Study of Histopathological Profile of Liver in Paediatric Choledochal Cysts:</b>  <a href="https://www.jebmh.com/articles/a-study-of-histopathological-profile-of-liver-in-paediatric-choledochal-cysts.pdf.pdf">https://www.jebmh.com/articles/a-study-of-histopathological-profile-of-liver-in-paediatric-choledochal-cysts.pdf.pdf</a></p> <p><b>This information can be useful for current article’s authors. Like expanding it to what are the histological changes for each type of cyst, what type of cysts show more reversible or irreversible histological findings, the age for patient groups, and on symptomatic patients, what are the symptoms that patients present that would make a physician think of possible irreversible changes at a histological level.</b></p>	
<p><u>Minor</u> REVISION comments</p> <p><b>Is the language/English quality of the article suitable for scholarly communications?</b></p>	<p>Yes, it is. But the article has multiple grammatical errors, e.g.: no spacing between some words, lack of grammatical articles (the, a, an), they shall be addressed before publishing it.</p>	
<p><u>Optional/General</u> comments</p>	<p>I would suggest adding surgical characteristics of choledochal cysts, if it is technically possibly. Explaining if every choledochal cyst could be excised totally or if there were some cases in which partial excision and mucosectomy were performed due to challenging scenarios.</p> <p>Also, in the inclusion criteria section, I’d recommend adding the age group of the patients. I know it was made based on paediatric surgery department, but still, the age group for the inclusion criteria shall be defined explicitly. On the other side, in the exclusion criteria section, the “Patients developing complication of drainage” is not really clarified. What kind of complications of drainage does the author mean? Does the author mean postop complications like surgical site infection? The reader may get confused in that point, because it is not explicit to what kind of complications make a patient belong to the excluded category of the study.</p> <p>I did not see the source from Table 1 nor Table 2. The source shall be stated just below each table. The graphics seem to be fine, but clarity shall be improved by making them more descriptive and easier to interpret.</p> <p>To strengthen this interesting manuscript/article, the author may expand the sample size, as well as continue the follow-up after certain period of time. The methodology on the surgical procedures (as I stated before) and biopsy techniques would add clarity. Correlating histopathological improvement with clinical parameters such as biochemical markers (bilirubin, ALT, etc.) could add a functional perspective.</p> <p>On the discussion section, I suggest the author to compare his results versus related studies, to compare if it is consistent or if there’s a difference between other authors’ work.</p> <p>Including imaging samples of histological images pre- and post-surgery to illustrate liver changes would be very good. This would help readers understand the impact of the surgery on liver pathology by adding visual elements.</p> <p>Regarding follow up, it would be interesting to see if FibroScan (liver elastography) has a place in this area, to compare between novel imaging techniques and histological results.</p>	

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**PART 2:**

	<b>Reviewer's comment</b>	<b>Author's comment</b> <i>(if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)</i>
<b>Are there ethical issues in this manuscript?</b>	<i>(If yes, Kindly please write down the ethical issues here in details)</i>	

**Reviewer Details:**

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