Reviewer’s report

Title: Intraoperative TOE guided management of newly diagnosed severe tricuspid regurgitation and pulmonary hypertension during orthotopic liver transplantation: a case report demonstrating the importance of reversibility as a favorable prognostic factor.

Version: 0 Date: 08 Jan 2019

Reviewer: Mohamed Younis

Reviewer's report:

Patients with PHT have higher post-transplant mortality rate. The report exhibits how difficult the decision-making could be, while facing such situation of newly discovered PHT in theatre. The authors have stressed on the fact that preoperative testing required to avoid such dreadful dilemma. Cole et al [Hepatology 2003] found that pulmonary hypertension can develop in this cohort of patients within duration ranging from 2 to 5 months, which might suggest TTE screening every 3 months in patients on liver transplant list. Moreover, preoperative diagnosis would give the chance to improve pulmonary haemodynamic measurements with means of vasodilatation, diuretics and/or ultrafiltration.

The authors, additionally, suggested that PHT not associated with smooth muscle hypertrophy and fibrosis might have satisfactory outcome after transplant due to the reversible nature of the condition. This should be taken into account while screening those patients as it could affect the patient's wait list position.

Are the methods appropriate and well described?
If not, please specify what is required in your comments to the authors.

Yes

Does the work include the necessary controls?
If not, please specify which controls are required in your comments to the authors.

Yes

Are the conclusions drawn adequately supported by the data shown?
If not, please explain in your comments to the authors.

Yes
Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?
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Not relevant to this manuscript

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Please indicate the quality of language in the manuscript:

Acceptable

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