

Review of: "Biliary Complications Following Liver Transplantation: The First Single-Center Tunisian Experience"

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The author attempted to share their experience with post-liver transplant biliary complications in their center. It is evident that the average number of transplants performed annually is merely 2, insufficient to cultivate a robust understanding of liver transplant procedures. This inadequacy may account for the notably high incidence of biliary complications in their series.

The manuscript requires thorough rewriting and proofreading by a native speaker due to numerous typos and grammatical errors. The methodology and results sections demand careful revision, as conflicting outcomes regarding the number of biliary complications are apparent. The utilization of ganciclovir as a treatment for biliary complications lacks explanation and scientific support.

Furthermore, the repeated use of the term "cadaveric" is criticized for its harsh connotation and should be replaced with the more neutral "deceased donor." The argument presented by the authors regarding the superiority of deceased donor (DD) over living donor (HJ) in biliary reconstruction is weak and fails to convincingly support their stance.