PEER-REVIEW REPORT

Name of journal: World Journal of Methodology

Manuscript NO: 73958

Title: Global prevalence of occult hepatitis C virus, a systematic review and meta-analysis

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer’s code: 02978909

Position: Peer Reviewer

Academic degree: MD

Professional title: Associate Professor

Reviewer’s Country/Territory: Iran

Author’s Country/Territory: Cameroon

Manuscript submission date: 2021-12-09

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-12-18 07:55

Reviewer performed review: 2021-12-31 17:33

Review time: 13 Days and 9 Hours

<table>
<thead>
<tr>
<th>Scientific quality</th>
<th>[ ] Grade A: Excellent</th>
<th>[ ] Grade B: Very good</th>
<th>[ Y] Grade C: Good</th>
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<tbody>
<tr>
<td></td>
<td>[ ] Grade D: Fair</td>
<td>[ ] Grade E: Do not publish</td>
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<tr>
<th>Language quality</th>
<th>[ ] Grade A: Priority publishing</th>
<th>[ Y] Grade B: Minor language polishing</th>
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<tbody>
<tr>
<td></td>
<td>[ ] Grade C: A great deal of language polishing</td>
<td>[ ] Grade D: Rejection</td>
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<tr>
<th>Conclusion</th>
<th>[ ] Accept (High priority)</th>
<th>[ ] Accept (General priority)</th>
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<tr>
<td></td>
<td>[ ] Minor revision</td>
<td>[ Y] Major revision</td>
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<tr>
<th>Re-review</th>
<th>[ ] Yes</th>
<th>[ Y] No</th>
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Peer-reviewer statements

Peer-Review: [Y] Anonymous  [ ] Onymous
Conflicts-of-Interest: [ ] Yes  [Y] No

SPECIFIC COMMENTS TO AUTHORS
Please see the attached file.
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Manuscript NO: 73958

Title: Global prevalence of occult hepatitis C virus, a systematic review and meta-analysis

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer’s code: 05166036

Position: Peer Reviewer

Academic degree: DVSc, PhD

Professional title: Associate Professor, Senior Scientist

Reviewer’s Country/Territory: India

Author’s Country/Territory: Cameroon

Manuscript submission date: 2021-12-09

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-01-08 02:17

Reviewer performed review: 2022-01-24 08:14

Review time: 16 Days and 5 Hours

Scientific quality

[ ] Grade A: Excellent  [ ] Grade B: Very good  [ ] Grade C: Good
[ Y] Grade D: Fair  [ ] Grade E: Do not publish

Language quality

[ ] Grade A: Priority publishing  [ ] Grade B: Minor language polishing
[ Y] Grade C: A great deal of language polishing  [ ] Grade D: Rejection

Conclusion

[ ] Accept (High priority)  [ Y] Accept (General priority)
[ ] Minor revision  [ ] Major revision  [ ] Rejection

Re-review

[ ] Yes  [ Y] No
SPECIFIC COMMENTS TO AUTHORS
Mbaga DS et al have presented the global data on OCI burden in a very systematic way. The detailed literature survey conducted for the review is appreciable. The review will surely provide an insight towards the need for change in OCI diagnostic approaches.
There are certain points to be taken into consideration: 1. Line 345 and 346: Two separate values, 12% and 9% are given for Significant variability in the OCI prevalence according to the category of the population in case of chronic liver disease. Authors need to clarify the correct Significant variability percentage for chronic liver disease. 2. Line 370-374: Authors have discussed about the limitations of the study by excluding the OCI burden from highest Hepatitis C prevalence zones such as Africa and South east Asia. In a hope to eradicate HCV by 2030, as recommended by the WHO, it is crucial to determine the burden of OCI in the highest prevalence regions, if the study ‘title’ includes the word ‘global prevalence’. Otherwise, the data presented would not provide the actual picture of the global OCI burden. The current study must include a section in ‘Abstract section’ and all summary sections, stating this limitation. 3. The manuscript suffers many grammatical flaws in certain line, e.g. line 123, 129, 130, 131, 185, 186, 187 etc...The Abstract also suffers from grammatical errors like...."The prevalence of seronegative OCI was elevated Southern Europe"...should read "The prevalence of seronegative OCI was in elevated Southern Europe."