

ANSWERING REVIEWERS

May 9, 2018

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 39042-Revised manuscript).

Title: HCV infection in children in the era of DAA

Authors: Malgorzata Pawlowska, Malgorzata Sobolewska-Pilarczyk, Krzysztof Domagalski

Name of journal: *World Journal of Gastroenterology*

ESPS Manuscript NO: 39042

Columns: REVIEW

The manuscript has been improved according to journal requirements and the suggestions of reviewers:

1. Reviewer's comments

Reviewer's code: 03647881

Dear authors, This review article presents a complete and very important information in the era of DAA for HCV-infected children, not only in Children & DAA"[1,2] but also in "Children & liver fibrosis assessment"[3].

The suggestion is only the author could add a conclusion to summarize his discussion and finding form this articles. Thanks!

1. Esther Granot, Etienne M. Sokal. Hepatitis C virus in children: deferring treatment in expectation of direct-acting antiviral agents. *Isr Med Assoc J.* 2015 Nov; 17(11): 707-711. 2. Indolfi G, Thorne C, El Sayed MH, Giaquinto C, Gonzalez-Peralta RP. The challenge of treating children with hepatitis C virus infection. *J Pediatr Gastroenterol Nutr.* 2017 Jun; 64(6): 851-854. 3. Pokorska-Spiewak M, Kowalik-Mikolajewska B, Aniszewska M, Pluta M, Marczyńska M. Non-invasive evaluation of the liver disease

severity in children with chronic viral hepatitis using FibroTest and ActiTest - comparison with histopathological assessment. Clin Exp Hepatol. 2017 Dec; 3(4): 187-193.

Answer

1) These articles are included in our work.

[20] Esther Granot, Etienne M. Sokal. Hepatitis C virus in children: deferring treatment in expectation of direct-acting antiviral agents. Isr Med Assoc J. 2015 Nov; 17(11): 707-711.

[34] Indolfi G, Thorne C, El Sayed MH, Giaquinto C, Gonzalez-Peralta RP. The challenge of treating children with hepatitis C virus infection. J Pediatr Gastroenterol Nutr. 2017 Jun; 64(6): 851-854.

[69] Pokorska-Spiewak M, Kowalik-Mikolajewska B, Aniszewska M, Pluta M, Marczyńska M. Non-invasive evaluation of the liver disease severity in children with chronic viral hepatitis using FibroTest and ActiTest - comparison with histopathological assessment. Clin Exp Hepatol. 2017 Dec; 3(4): 187-193.

2)

Conclusion section has been added to the manuscript.

CONCLUSION

The largest group of children infected with HCV consists of children born with maternal-foetal HCV transmission. Other groups include children with HIV infection, adolescents with a history of multiple sexual partners, adolescents with a history of intravenous drug use and child victims of sexual assault. Screening for hepatitis C should be considered for children with risk factors for HCV and for pregnant women. The availability of safe regimens without IFN for adolescents older than 12 years and weighing >35 kg makes them the best option in previously untreated and experienced patients, regardless of the severity of liver disease and the presence or absence of co-morbidities. Therefore, the combination of PEG IFN and ribavirin is no longer recommended. Chronic HCV infection is generally mild in children, but treatment should be an integral part of the public health approach necessary to succeed in the elimination of hepatitis C. The early identification of fibrosis in children may play a significant role in preventing the development of advanced liver disease. The non-invasive detection of paediatric cases with significant fibrosis progression can be very useful in treatment decisions. The results of available studies suggest that liver stiffness measurement methods and serum biomarker tests will

help clinicians select paediatric patients with CHC who should undergo liver biopsy and can be used as a monitoring tool during follow-up.

Reviewer's code: 03479057

The article discuss a very important subject. Its impact is significant and thus is appropriate for this journal. I would recommend that the article be accepted

Answer

We thank the reviewer for their kind comments.

2. Journal requirements

We have revised the manuscript according to the Editorial suggestions. Thus we have added the all authors' ORCID numbers, citation, two tables, one figure and conclusion part to the manuscript. Format has been updated.

Our manuscript have been modified in the language professional English language editing company, which was recommend by WJG and could provide the language editing certificate. We also provided audio file describing the core tip.

We hope that will find the revised manuscript to be suitable for publication in World Journal of Gastroenterology.

Thank you once again for inviting us to write this review paper.

On behalf of the authors,
Sincerely yours,

Prof Malgorzata Pawlowska MD., PhD

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