



**PEER-REVIEW REPORT**

**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 37399

**Title:** Fatty liver in hepatitis C patients post-SVR with direct-acting antivirals

**Reviewer's code:** 00225318

**Reviewer's country:** Spain

**Science editor:** Ze-Mao Gong

**Date sent for review:** 2017-12-05

**Date reviewed:** 2017-12-05

**Review time:** 0 Hour

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input type="checkbox"/> No	

**COMMENTS TO AUTHORS**

the study of Nouredin et al. is very interesting and fits in an extremely important line at present: the follow-up of the patients once cured of the HCV infection through the excellent antiviral therapies. The study is methodologically very correct and in this sense it is relevant. The data provided are important but it presents a couple of important limitations, which the authors themselves recognize: 1: They do not have data on steatosis before treatment, so the effect of treatment on it can not be assessed, this situation seems unsolvable since, as the authors themselves indicate, they did not have the necessary technology to assess steatosis at the time of treatment start of patients. 2: The second limitation of the lack of follow-up of the evolution of steatosis after treatment, although also recognized by the authors, it is possible to be resolved by lengthening the study for a few more months. A single year of time after the virological response does not seem a valid period of time to assess the possible resolution or change of



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stetosis. For this reason it is suggested that the study be completed with this additional study since probably at the time of submission of this manuscript a significant time has passed since the last assessments of these patients



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**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 37399

**Title:** Fatty liver in hepatitis C patients post-SVR with direct-acting antivirals

**Reviewer’s code:** 01555255

**Reviewer’s country:** Italy

**Science editor:** Ze-Mao Gong

**Date sent for review:** 2017-12-05

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**Review time:** 2 Hours

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input type="checkbox"/> No	

**COMMENTS TO AUTHORS**

- Introduction section: Three types of steatosis have been defined in the HCV patients. The first is a metabolic type, associated with metabolic syndrome. The second is a viral steatosis without any known steatogenic co-factors and is directly linked to the cytopathic viral effect. The third type can be considered a “middle ground” between the first and the second one: even if this entity is virus associated, it could be more appropriate to define it as a combination of viral and metabolic factors. This entity has been associated with a direct interference of HCV core protein in the intracellular, post-receptorial pathways of insulin. Literature report the link between HCV genotype 3 infection and steatosis (Abenavoli et al. World J Gastroenterol. 2014) - Methods section: why the Author not include in the laboratory test GGT? I suggest to report also the therapeutic DAA protocol adopted for any HCV genotypes. - A yellow line with a request for statistician in included in this file. Please remove it. - Results section: the used



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TE cut-off are codified in literature? If yes, i suggest report the reference. - Discussion section: is possible that the results are related to the therapy? No differences are founded between patients of different ethnicity. What is about this point, the idea of the Author?



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**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 37399

**Title:** Fatty liver in hepatitis C patients post-SVR with direct-acting antivirals

**Reviewer's code:** 00003361

**Reviewer's country:** United States

**Science editor:** Ze-Mao Gong

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**Review time:** 1 Day

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
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		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

**COMMENTS TO AUTHORS**

This is a descriptive study of the residual liver disease (steatosis and fibrosis) present as measured by transient elastography on 101 patients with hepatitis C after completion of successful antiviral treatment. Patients with HCV genotype 3 were excluded because of the independent effects of this genotype on fatty liver. In addition, presumably patients without clinical cirrhosis were excluded, although this is not clear. The main findings were that significant steatosis was present in 47.5% of patients following SVR, and these patients were more likely to have significant fibrosis (present in 6.25%). These findings in a single cohort indicate that significant liver disease may still occur in HCV patients post DAA, and some may require continued follow up. Specific comments: 1. Abstract- specify number of patients studied. 2. Methods - please define what the normal levels of AST and ALT used in this study are. 3. Results and Table 1- it is not clear how many patients clinically had cirrhosis pre-DAA treatment in this cohort?



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Presumably some may have had liver biopsies or clinical diagnosis of cirrhosis based on lab testing or fibroscan prior to receiving DAA. The discussion section mentions that patients with cirrhosis (again how was this determined?) were excluded, however this is not specified in the abstract, methods or results. 4. Tables 2 and 3- please add rows indicating the % patients with fibrosis scores >7 in each of the groups. In Table 3 add the number of patients in each of the two groups in the first row.