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Flat C, 23/F., Lucky Plaza,  
315-321 Lockhart Road, Wan Chai, Hong Kong, China

## ESPS Peer-review Report

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

**ESPS Manuscript NO:** 8569

**Title:** MANAGEMENT OF NON-ALCOHOLIC FATTY LIVER DISEASE: EVIDENCE-BASED CLINICAL PRACTICE REVIEW

**Reviewer code:** 00008590

**Science editor:** Gou, Su-Xin

**Date sent for review:** 2013-12-31 09:12

**Date reviewed:** 2013-12-31 19:10

| CLASSIFICATION                               | LANGUAGE EVALUATION  | RECOMMENDATION                      | 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"/> Existed    | <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"/> No records | <input type="checkbox"/> Rejection                     |
| <input type="checkbox"/> Grade D (Fair)      | <input type="checkbox"/> Grade D: rejected                           | BPG Search:                         | <input type="checkbox"/> Minor revision                |
| <input type="checkbox"/> Grade E (Poor)      |  | <input type="checkbox"/> Existed    | <input type="checkbox"/> Major revision                |
|  |  | <input type="checkbox"/> No records |  |

## COMMENTS TO AUTHORS

This is an excellent clinical review how to deal with NAFLD patients. However, a detailed discussion is missing regarding the diagnostic work up. Prevalence of NAFLD is up to 30%. Do we need a liver biopsy? Do we need a differentiation from NASH? In other areas of liver disease (DILI), there is the question of the need of liver biopsy (Teschke R, Frenzel C. Drug induced liver injury: do we still need a routine liver biopsy for diagnosis today? Ann Hepatol 2014; 13: 121-126). Please quote this report and discuss the arguments as compared to NAFLD and NASH. Please include a flow diagram what to do diagnostically with a patient with sonographic signs of fatty liver. You need some parameters to ascertain the diagnosis, because liver biopsy cannot be done in up to 30% of the population.



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**Reviewer code:** 00039434

**Science editor:** Gou, Su-Xin

**Date sent for review:** 2013-12-31 09:12

**Date reviewed:** 2014-01-05 15:28

| CLASSIFICATION                                     | LANGUAGE EVALUATION   | RECOMMENDATION                      | 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 checked="" type="checkbox"/> Grade B: minor language polishing | <input type="checkbox"/> Existed    | <input type="checkbox"/> High priority for publication |
| <input checked="" type="checkbox"/> Grade C (Good) | <input type="checkbox"/> Grade C: a great deal of language polishing  | <input type="checkbox"/> No records | <input type="checkbox"/> Rejection                     |
| <input type="checkbox"/> Grade D (Fair)            | <input type="checkbox"/> Grade D: rejected                            | BPG Search:                         | <input type="checkbox"/> Rejection                     |
| <input type="checkbox"/> Grade E (Poor)            |   | <input type="checkbox"/> Existed    | <input checked="" type="checkbox"/> Minor revision     |
|  |   | <input type="checkbox"/> No records | <input type="checkbox"/> Major revision                |

## COMMENTS TO AUTHORS

The paper is well structured. The conclusions are risky.



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**Reviewer code:** 00006552

**Science editor:** Gou, Su-Xin

**Date sent for review:** 2013-12-31 09:12

**Date reviewed:** 2014-01-12 11:21

| CLASSIFICATION  | LANGUAGE EVALUATION   | RECOMMENDATION                      | CONCLUSION   |
|---|---|-------------------------------------|--|
| <input checked="" 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 checked="" type="checkbox"/> Grade B: minor language polishing | <input type="checkbox"/> Existed    | <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"/> No records | <input type="checkbox"/> Rejection                     |
| <input type="checkbox"/> Grade D (Fair)                 | <input type="checkbox"/> Grade D: rejected                            | BPG Search:                         | <input checked="" type="checkbox"/> Minor revision     |
| <input type="checkbox"/> Grade E (Poor)                 |   | <input type="checkbox"/> Existed    | <input type="checkbox"/> Major revision                |
|   |   | <input type="checkbox"/> No records |  |

## COMMENTS TO AUTHORS

This is a well-constructed, evidence-based literature review and practice guideline for Chilean hepatologists. The expert panel analyzed clinical trials available in literature in evaluating current therapies for NAFLD patients, especially NASH patients. They focused on clinical trial methodology, quality and results, and asked 16 specific questions with levels of evidence and recommendation. Moreover, the recommendations were circulated in a national meeting of gastroenterologists & hepatologists with feedbacks. Thus, the recommendation is well-represented, and a final consensus was reached. The consensus is well-prepared with few linguistic errors. The recommendation of interventional options is evidence-based and well-balanced in terms of what should be prescribed for patients based on individualized conditions. Therefore, this guideline is instructive not only for Chilean physicians, but also for those who manage NAFLD patients in other nations.