

ANSWERING REVIEWERS

Friday, 28 august, 2015

Dear Editor,



Please find enclosed the edited manuscript in Word format (ESPS Manuscript NO: 18291).

Title: Hepatorenal syndrome: update on diagnosis and treatment

Author: Olga Baraldi, Chiara Valentini, Gabriele Donati, Giorgia Comai, Vania Cuna, Irene Capelli, Maria Laura Angelini, Maria Ilaria Moretti, Andrea Angeletti, Fabio Piscaglia and Gaetano La Manna

Name of Journal: *World Journal of Nephrology*

ESPS Manuscript NO: 18291

The manuscript has been improved according to the suggestions of reviewers and we highlighted the changes made to the manuscript according to the peer-reviewers' comments as requested;

1 Format has been updated

2 Revision has been made according to the suggestions of the reviewers. In details:

- We tried to explain the pathophysiology of cardiac involvement in HRS without broadening too the topic. The use of terlipressin is relatively safe with adverse effects generally reversible upon reduction the dosage of the drug without the need for suspension of therapy. Creatinine was excluded in diagnostic criteria of HRS due to different laboratory methods for its measurement creatinine assays are subject to interference by chromogens, bilirubin being the major one Serum creatinine concentration is influenced by several factors unrelated to renal function, such as dietary intake of meat, turnover rate of creatine to creatinine, renal tubular secretion of creatinine, state of hydration, as well as the total total muscle mass. In cirrhotic patients the additional reasons because creatinine is inadequate for renal function assessment are the decreased hepatic production of creatine (reduction in creatine pool), the oedematous state that complicates end-stage liver disease and use of drugs such as cephalosporins (used as they are non-nephrotoxic) and calcitriol which affect the tubular secretion of creatinine.

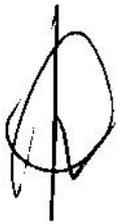
- We tried to shorten the text and we made more tables and figures. We have expanded and updated the diagnosis and treatment section to meet our goal with reference to the recent findings of literature.

3 References and typesetting were corrected.

Thank you again for publishing our manuscript in the *World Journal of Nephrology*

Sincerely yours,

Gaetano La Manna

A handwritten signature in black ink, appearing to be the name 'Gaetano La Manna' written in a cursive, somewhat stylized script. The signature is located below the typed name.