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Dear Editor,

Many thanks for accepting our re-submission to the World Journal of Hepatology. We have read the reviewer's comment and thank them for their constructive assistance. We have addressed their points in the manuscript and included them below with our considered response.

Major points

Rev 2. A short para discussing the effects of large volume paracentesis in cirrhotics; how is defined, side-effects (e.g. post-paracentesis circulatory dysfunction etc.), and how these are prevented

Rev 4 In this review paper, the authors try to describe the effect of albumin solutions on patients with cirrhosis and acute on chronic liver failure. The idea is interesting. There is a reservation about the study, which needs revision: It is suggested to focus on "cirrhosis and acute on chronic liver failure" as mentioned in the title and refine the irrelevant contents in order to refrain from overlapping the published data.

At the request of reviewer two we have added some further information regarding large volume paracentesis. We have removed sections where they specifically relate to other diseases, but have retained the section on critically ill patients with sepsis and or hypoalbuminaemia. We feel this is of key importance to patients with cirrhosis as the insult that leads to acute on chronic liver failure is often infective. Patients with cirrhosis and acute on chronic liver failure will have been represented in these clinical trials.

Minor revisions

Rev 1 minor revision should be concerned: (1)The using of abbr in manuscript text, such as: LVP in Introduction means "large volume ascitic paracentesis", but "Low volume paracentesis" in Patients With Cirrhosis of main text; the full words, abbr of SBP and HAS appear 2 times; some abbr (e.g. HMA, VCAM-1, NF-kB) do not need; NSAID should give full words. (2)The trans-capillary escape rate is 4.5%/hour in text, but 4.5%/day in figure 1, please correct it.

Rev 3 A minor point is that related references should be inserted in the "Introduction" part. Line 15 (page 4), word "capacity" should be deleted.

Rev 5 Data sources, study selection and data extraction may need to be mentioned in the text if they are listed in the abstract.

We thank reviewer 1 for their comments and to aid the reader we have followed their recommendations regarding abbreviations, including removing the full terms of SBP & HAS where duplicated and writing non-steroidal anti-inflammatory drugs in full. We have amended the note regarding trans-capillary escape rate in the text. As per Reviewer 3 we have deleted the duplicate 'capacity' from the text and added references to the introduction. We thank reviewer 5 and have added the suggested information to the main text of our introduction.

Once again, many thanks for agreeing to publish our article and please do not hesitate to contact us if there are any queries.

Yours faithfully

Dr C J Valerio

On behalf of the authors