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CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[ ] Grade A (Excellent)	[Y] Grade A: Priority Publishing	Google Search:	[Y] Accept
[ ] Grade B (Very good)	[ ] Grade B: minor language polishing	[ ] Existed	[ ] High priority for
[Y] Grade C (Good)	[ ] Grade C: a great deal of	[ ] No records	publication
[ ] Grade D (Fair)	language polishing	BPG Search:	[ ]Rejection
[ ] Grade E (Poor)	[ ] Grade D: rejected	[ ] Existed	[ ] Minor revision
		[ ] No records	[ ] Major revision

COMMENTS TO AUTHORS

The manuscript is well written and easily describes an overview about HCV fields. It describes clearly the actual HCV therapies and the patients HCV detection. It can help a young investigator to understand easily the HCV state of art.

ESPS Peer-review Report
Name of Journal: World Journal of Gastroenterology
ESPS Manuscript NO: 7207
Title: HCV in the new era: perspectives in epidemiology, prevention, diagnostics and predictors of response to therapy
Reviewer code: 00649613
Science editor: Zhai, Huan-Huan
Date sent for review: 2013-11-09 21:56
Date reviewed: 2013-12-23 19:01

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[ ] Grade D (Fair)	language polishing	BPG Search:	[ ]Rejection
[ ] Grade E (Poor)	[ ] Grade D: rejected	[ ] Existed	[ ] Minor revision
		[ ] No records	[ ] Major revision

COMMENTS TO AUTHORS

This is an interesting and well written review providing a comprehensive overview on the current knowledge and future challenge on diagnostic and therapeutic approaches of HCV infection. There are only minor points to take into account: 1. A figure showing the distribution of HCV genotypes could be useful. 2. At page 8, the authors state that HCV genotypes have little impact on disease progression. I do not fully agree with this sentence, for instance it is well known that genotype 1 is more aggressive than other genotypes. So I suggest to reformulate the sentence. 3. At page 8, please add the reference regarding the SVR of different HCV genotypes to IFV+RBV therapy. 4. When discussing studies on HCV vaccine, please highlight the need to carry out accurate studies in order to avoid the same experience achieved in the field of HIV vaccine design. 5. At page 14, even taking this restriction into account, HCV antigen assay can represent a useful diagnostic marker in those laboratories where HCV-RNA molecular tests cannot be performed. I can only partially agree with this sentence. The goal is to improve the availability of highly sensitive assays in all countries where HCV infection is endemic. This is critical for HCV eradication strategies. So I suggest to soften this sentence. 6. The authors should include a table summarizing the currently assays for HCV RNA detection and quantification with related lower limits of detection. 7. Please mention at page 16 the study by Harrington published in Hepatology 2012. 8. Please, report the reference for the biphasic phase of HCV RNA decay during triple therapy at page 17. 9. In Table 2, the authors should include also mutations associated with resistance to the incoming PIs. 10. Please modify K80Q in Q80K at page 19. Some language modifications are also suggested: 11. At page 3, please modify "so

detecting" in "as well as detecting" 12. At page 7, please reformulate " is commonly isolates" 13. At page 9, please change "CDC recommend" in "CDC recommends"