

Format for ANSWERING REVIEWERS



July 25, 2014

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 10343-Review.docx).

Title: Autoantibodies in Chinese Patients with CHB: Prevalence and Clinical Associations

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Name of Journal: *World Journal of Gastroenterology*

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The manuscript has been improved according to the suggestions of reviewers:

1 Format has been updated

2 Revision has been made according to the suggestions of the reviewer

Review #1

(1) Q: Need more justification why this study is important? For instance, is there any confusing between the current autoantibody with autoimmune hepatitis and chronic hepatitis B or C or even with cirrhosis?

A: The importance of this study has been underlined in the Instruction section accordingly.

(2) Q: In the study, the authors divided cirrhosis into compensated cirrhosis and non-compensated cirrhosis. Is it necessary? I don't see any autoantibody difference between compensated and non-compensated cirrhosis. So, they don't need to divide and just combine the 2 groups into cirrhosis group. It is more important to add one more HCC group, if possible.

A: It is necessary to divide cirrhosis into compensated and non-compensated cirrhosis. By dichotomization of the autoantibody profiles, the AIH profile was correlated significantly with compensated cirrhosis, but not with non-compensated cirrhosis (Table 9 in revised MS).

(3) Q: The authors have to explain more about cirrhosis group they included in the study. For instant, are they HBV-associated? It is more important to add one more HCC group, if possible.

A: Cirrhosis is closely associated with HBV infection. CHB patients are at high risk of developing cirrhosis. This has been mentioned in the revised manuscript. HCC group has been added and produces interesting findings (Table 6 in revised MS).

(4) Q: Too many Tables. Un-necessary Tables (Tables 6-8) together with sentences in page 8 have to be omitted.

A: Table 6-8 and the respective sentences in text have been omitted.

(5) Q: The manuscript format did not follow the WJG format. Please revise!

A: The manuscript format has been revised according to the WJG requirements.

Reviewer #2

(1) Q: Regarding study design, a prospective follow up would provide more robust results of the potential predictive outcomes of baseline type & titer of autoantibodies and long-term CHB

disease severity course (absence/ compensated/ decompensated cirrhosis).

A: We will undertake a prospective study to follow up the change of autoantibodies during the progression of CHB in the future study.

(2) Q: Usually, post-treatment aggregate score to define definite AIH is >17.

A: The score has been corrected in the revised manuscript.

(3) Q: Is there an analysis if prior interferon treatment has any influence to the results of CHB autoimmunity in the specific study? (confounding factor for various disease profiles, e.g. HBeAg status). If only oral treatment was given it should be mentioned in the Material & Methods section.

A: Only the patients previously treated with first-line oral medications were included in this study, which has been mentioned in the Materials and Methods section in the revised manuscript.

(4) Q: Are there any data regarding CHB autoimmune profile and e-seroconversion status? It would be interesting from the clinical point of view to investigate if immune responses to specific autoantigens may predict better or worse e-loss/ e-seroconversion rate.

A: There are no data available to address this issue, but we will undertake a prospective study to investigate the relationship between autoantibody profile and e-seroconversion.

3 References and typesetting were corrected

Thank you again for publishing our manuscript in the World Journal of Gastroenterology.

Sincerely yours,



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