

All of the revisions and additions to the text were indicated **in red** in the revised manuscript. Our point-by-point replies to all comments by Reviewers were as follows.

Response to reviewer #69693

Re: The authors propose to carry out a review article on the surgical approach in hepatocellular carcinoma related to hepatitis C. It is a current, relevant topic and of interest to the reader of the World Journal of Hepatology. However, there are weaknesses in the preparation of the review that compromise its aim. More than half of the manuscript is intended for surgical approach to HCC generally and without proper specificity in relation to primary liver tumors related to hepatitis C virus. Besides, a lack of depth review was conducted. The authors did not describe the method of selection of literature, which would be desirable, although the authors do not indicate whether the review was systematic. The figures do not clarify the subject matter discussed in the manuscript. The theme of the review is attractive, but I believe that the authors should outline the subject in a more specific and in a deep approach.

Answer: Thanks for the comments. The manuscript was rewritten according to the reviewer's suggestions. See revised version.

Response to reviewer #2462252

Re: A good overview of the subject with some good practical tips.

Answer: Thanks for your review. We have revised the manuscript according to the other reviewers. See revised version.

Response to reviewer #2860625

Re: The study is presented as a review of current knowledge on HCV-related HCC but the methodology of the review is unknown and the revision system is totally arbitrary. There is a diffuse lack of depth in particular in the regard of liver transplantation where it is largely known that HCV eradication affects survival. One of the purpose of the study

is to discuss about the optimal surgical approach for these patients but is difficult to point up the level of evidence of any topic and therefore the whole paper sounds like an “expert opinion”.

Answer: The manuscript was thoroughly rewritten according to the reviewer’s suggestions. Unfortunately, however, limited lines of evidence are currently available in surgical approach for HCV-related HCC. Therefore, it is rather difficult to keep the objectiveness in this “invited” review. We tried to clarify the objectives and methodology, and also enriched the descriptions including as much evidence as possible in the revised version. See additions and corrections.

Re: Some of the references are completely off topic. In example 30-31-32 concern liver resection for colorectal metastases.

Answer: Thanks for your comments. This paragraph is describing how to secure the safety of hepatic resection. Surgical indication and the extent of surgery are generally determined by the measured parenchymal volume of the future liver remnant and hepatic functional reserve IRRESPEVTIVE of the disease to be treated. This sentence is talking about the general principle in the risk management for hepatectomy and we feel these references are relevant to the topic.

Response to reviewer #2939706

Re: It seems to me a good manuscript, correctly developed with a suitable order, and it summarizes the relevant approaches and creates an awareness on the subject. Moreover, it brings an interesting contribution to the knowledge of the health quality improvement. Consequently, the article is suitable for publication in its present form.

Answer: Thanks for your review. We have revised the manuscript according to the other reviewers. See revised version.