ANSWER TO REVIEWERS

October, 10, 2014

Dear Editor,

Title: IGF-1 mRNA isoforms and IGF-1R mRNA expression in chronic hepatitis C

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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

Response to the comments of reviewers:

Reviewer No 1 (02861027):
(1). Information about aim and importance of the study was added.
(2). Running title has been changed according to reviewer suggestion.
(3). Information about other reasons of liver damage has been added.
(4). Company information of statistical software has been indicated.
(5). Text has been carefully revised for some typo and formatting errors.
(6). In introduction section we try to cite only the most of important data on presented problem. It's was difficult to minimize amount of citations, when there are really useful for people interested in problem of IGF-1 alternative splicing and expression of IGF-1 mRNA isoforms and IGF-1R mRNA isoforms in different clinical problems. According to reviewer suggestion we removed 2 papers from Introduction and Literature.

Reviewer No 2 (00005177):
(1). Number of biopsies from patients witch chronic hepatitis C investigated in this study was 34. Biopsy collection time was limited to one year. According to study design we eliminated patients with other liver diseases, history of cancer or other co-morbidities (eg. diabetes, overweight, metabolic syndrome, kidney problems, etc), history of earlier antiviral treatment, alcohol abuse . In recent years, in our center as well as in others FibroScan replaces the liver biopsy. Patients prefer noninvasive evaluation method of liver fibrosis. Patients with clinically diagnosed liver cirrhosis do not require liver biopsy for decision of beginning of antiviral therapy. The typo and formatting errors were corrected.

(2). We have put a special attention to statistical analysis. Decision on the division of study group was based on detailed analysis of patients. It was statistically impossible to compare patients with fibrosis S0-S2 versus S3-S4 because of limited number of patients with advanced fibrosis and liver cirrhosis.
(3). All liver biopsies were done in diagnostic process before decision of antiviral therapy according to local criteria. In this study, the aim was not to evaluate expression of IGF-1 mRNA and IGF-1R mRNA isoforms as the prognostic factors for clinical course of chronic hepatitis C or response to antiviral treatment. There was no observation in time in this study. Some of patients from this study started antiviral therapy (pegylated interferon with ribavirin) available in our country. Era of new drugs (DAA) has started this year, but we cannot specify when new drugs will be available to our patients. According to reviewer suggestion we try to gather data on clinical course and effects of antiviral therapy in future. This process requires some years to answer how progression or regression of liver fibrosis exist. Thank you for this notice. This inspired us to plan further patients observation.

3. References and typesetting were corrected

Thank you for the reminder to determine the Columns of this manuscript.

Your proposition to make manuscript as "Research Report" is good.

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

Sincerely yours,

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