

July 01, 2015

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 18382-review.doc).

**Title:** Treatment of the chronic hepatitis B patients who has YMDD mutation

**Authors:** Calica Utku A, Karabay O

**Name of Journal:** *World Journal of Gastroenterology*

**ESPS Manuscript NO:** 18382

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

Point 1: This letter to editor try to clarify the usage of lamivudine in CHB patient that mentioned in article entitled by "Natural YMDD-motif mutants affect clinical course of lamivudine in chronic hepatitis B". Authors thought it was not appropriate to use lamivudine in YMDD mutation patients, actually, in China, The Diagnostic Standard from the Chinese National Program for Prevention and Treatment of Viral Hepatitis didn't not suggest to do the mutation detection at the beginning of the treatment, so for most patients, doctors didn't know the mutation information at that time point, only after a period of treatment, if patients still in a high viral load, doctors try to prescribe the YMDD mutation detection to see if there any mutations, and then try to change the drug usage. But for the article mentioned above, the usage of lamivudine in patients that already known had YMDD mutation may have some ethics problems. Point 2: Some sentences need to be refined. Such as "Firstly, lamivudine use must be explained, although more potent drugs can be used for patients of very high viral load(mean HBV-DNA:6.67±2.47 Log 10 genome equivalents)." The logistic of this sentences is not clear.

R: High resistance barrier drugs (e.g. tenofovir, entecavir) are recommended in chronic viral hepatitis in many countries. The explanations of the authors about the reason of administering lamivudine to the patients under risk are necessary for readers. Because administering lamivudine to the patients with high viral load and possible YMDD resistance mutation is risky. Therefore, we need an explanation to such patients with high viral load (mean HBV-DNA:6.67±2.47 Log 10 genome equivalents) about the reason for their using lamivudine.

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

Sincerely yours,

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