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Mona Ascha, B.S.

Department of Gastroenterology and Hepatology

Cleveland Clinic

9500 Euclid Avenue

Cleveland, OH 44195

440-724-6245

mx256@case.edu

World Journal of Hepatology

To Shui Qiu,

We would like to thank you for considering our manuscript entitled: "**Predictors of Mortality after Transjugular Portosystemic Shunt,**" for publication in the *World Journal of Hepatology*.

We would like to re-iterate the fact that our research is novel, represents the combined work of all the co-authors, and has not been submitted to any other scientific journal for simultaneous review. It is our hope that this manuscript can help pave the way for novel innovations in using the TIPS procedure in patients with liver disease. This paper should be of interest to a broad readership.

This manuscript describes original work and is not under consideration by any other journal.

As follows, please find a point-by-point response to the comments made by reviewers. The corresponding changes are highlighted in yellow in the manuscript.

- The author contributions section has been fixed.

- An audio core tip was included in the original submission. It has been re-submitted with this revision.
- Funding sources:
 - The work for this paper was not part of any specific grant and for this reason no new file is sent. Dr Tonelli's salary was supported by the NIH grant mentioned in the paper for another research project (microvascular dysfunction in pulmonary hypertension). This grant permitted him to allocate time to do this research.
- The comments section was included in the original paper; this section has been moved so that it comes before the Figure Legend.

Reviewer Comment #1: 1) This retrospective study reviewed the medical records of 467 patients who underwent TIPS placement. The authors focused on the prognostic importance of hemodynamic and echocardiographic determinations (right atrial and portal vein pressures both before and after TIPS). The results indicated that the increase in RA pressure after TIPS was associated with increased mortality. Age, splenectomy, MELD score and CTP grade were independent predictors of long-term mortality after TIPS. It is useful complement for the predictors of long-term mortality after TIPS. 2) This retrospective study is important clinical value to select the patients for TIPS and evaluate the prognosis for patients who underwent TIPS placement.

- We thank you for the comments.

Reviewer Comment #2: Some minor comments for considerations: 1. It would be nice to provide the survival curves of different RA pressure and RVSP. 2. Table 1 is too big, may group the etiologies with prevalence less than 2% into others and mentioned it at footnote. 3. Please provide some basic laboratory parameters at Table 1 (e.g. creatinine, platelet count, INR, ALT etc)

- We thank you for the comments.
- The survival curves have been added to the paper as Figure 2 (the other figures have been appropriately re-numbered).
- Table 1 has been edited to remove the etiologies of liver disease with prevalence less than 2% and mentioned as a footnote.
- Table 1 has been edited to include basic laboratory parameters:

Reviewer Comment #3: The current manuscript, from Mona Ascha BS et al. is a retrospective study evaluating patient subjected to TIPS placement. The aim of the study is to investigate if echocardiographic and hemodynamic determinations can provide prognostic information that will enhance risk stratification of patients. The study is interesting, well structured and the results may provide useful informations for clinical practice.

- We thank you for the comments.

Please let me know if you have any questions or concerns regarding this revision. Thank you for your consideration.

Kind regards,

Mona Ascha, B.S.