8 April 2013

Dear Editor,

Title: **Normal Vitamin D levels are associated with spontaneous Hepatitis B surface Antigen Seroclearance**

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We would like to thank the editorial board and the three reviewers for the thoughtful review of our manuscript. We have revised the paper in response to the reviewers’ comments. A revised manuscript, with changes tracked, is enclosed.

With this letter, we wish to respond to each of the points raised by the reviewers.

We here declare that this final proof of the manuscript was performed by native English speaker. This was done by one of the co-authors of this paper. All grammar, typos, references and tables were revised accordingly.

Reviewer 1:

1. "For this reason, only the first phrase of the conclusion is true, not the second (vitamin D deficiency can be significant risk factor for lack of HBsAg seroconversion), because no comparison with a control group of HBsAg carrier without spontaneous seroconversion has been provided".

**Reply**: Thank you for that important remark. Due to the design of our study, we cannot conclude that that vitamin D deficiency us actually a risk factor. This point was clearly taken and this sentence was erased from our manuscript.

1. " In table 1: higher serum levels of vit D and 25 (OH) vitamin D are reported in low vitamin level column."

**Reply**: This was obviously a mistake and was corrected in the revised version of table 1.

1. " There is a clear difference in C-reactive protein (PCR) serum levels between the 2 groups, but it is not appear as significant".

Reply: Thank you for that remark. There was a typo error that caused that mistake. The actual numbers were corrected in table 1, for the group with normal vitamin D levels.

1. " The reference units of every single parameter have to be recorded in the column of characteristics."

**Reply**: This remark was clearly taken into account, and all parameters were moved into the column of characteristics in table 1 and table 2.

1. " In discussion it should be nice to have some comment on the meaning of PCR and its relationship with HBsAg clearance and vitamin D levels instead of a long list of immune mediated diseases associated with HBV in which one may speculate that vitamin D may be theoretically implicated."

**Reply**: This comment was taken very much into consideration. We did not find any significance of the CRP levels, as mentioned in the previous reply. We did revise and condense the data regarding many other autoimmune diseases.

1. " Many misspellings along the manuscript."

**Reply**: We have performed a whole revision of grammar, language and typos.

Reviewer 2:

1. " the idea of maniscrupt is very original and a hot topic. however, it needs to be re-written because of grammer mistakes and thecnical errors"

**Reply**: We have performed a whole revision of grammar, language and typos.

Reviewer 3:

1. "I also feel that the two groups of patient, Obese and overweight are too close to have for robust analysis and findings. It makes sense to think that an overweight patient is already on the path of developing Vitamin D deficiency as seen in the two reported cases in the study or insufficiency. Though stated as a limitation, using an external control of normal patient without NAFLD would have been better"

**Reply**: Thank you for that thoughtful reply. We have decided not to specify the patient's weight as a risk factor for vitamin D deficiency. We have added a sentence in the limitations to specifically refer to this remark. Unfortunately, the design of our study, did not allow us to use an external control group.

We believe that the manuscript is now improved and we hope that you will find it suitable for publication at its current form. However, please do not hesitate to let us know should more revisions are required.

Sincerely yours,

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