

April 21, 2016

Lian-Sheng Ma
Editor-in-Chief
World Journal of Gastroenterology

Dear Lian-Sheng Ma

Herein you will find the revised manuscript No. 25889 formerly entitled “**Accessibility to HCV antiviral treatment in Latin America: A need for changes in attitude in politicians and physicians?**” by authors Arturo Panduro and Sonia Roman for publication in World Journal of Gastroenterology (ID 00053786)

Among the series of modifications that we have introduced based on the commentaries of the reviewers, we propose a shorter title: **Need of righteous attitudes towards eradication of HCV infection in Latin America.**

We have addressed the observations point-by-point. We hope that the editorial is now fit for publication. However, any further comments will be gladly addressed. We guarantee that there is no conflict of interest in our paper and we have not submitted this paper elsewhere.

Best regards,

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April 21, 2015

Dear Editor,

Please find enclosed the edited manuscript in Word format (25889-Revised_manuscript.doc).

Title: Need of righteous attitudes towards eradication of HCV infection in Latin America

Author: Arturo Panduro, Sonia Roman

Name of Journal: *World Journal of Gastroenterology*

ESPS Manuscript NO: 25889

The manuscript has been improved overall according to the suggestions of reviewers.

I. Format has been updated

II. Documents uploaded:

- 25889-Revised_manuscript
- 25889-Answering reviewers
- 25889-Copyright assignment
- 25889-Audio core tip
- 25889-Conflict-of-interest statement
- 25889-Google Scholar
- 25889-Crosscheck
- 25889-Language certificate

III . Revision has been made according to the suggestions of the reviewer

Reviewer: 00037028

1. I think the paper is fine overall. The first sentence in the last paragraph on page 10 does not make sense. It needs some reworking.

Answer: We have modified this sentence on Page 11, last paragraph as suggested.

To conclude, the disclosure of the clinicians (speakers), in regards to their sponsorship by the pharmaceutical industry, should be regulated by law and enforced by an ethical practice

Reviewer: 00159305

1. I read with interest your manuscript. I entirely agree with your proposed changes in attitude of politicians, governments, health authorities and medical community from LA countries towards the access of new HCV treatments. The manuscript can be accepted for publication after correction of the few grammar/spelling errors (including the title!).

Answer: We have submitted the manuscript for language polishing and modified the title as suggested.

Reviewer's comment sent by Ya-Juan Ma, scientific editor

Reviewer Comments

1. The reviewer believes that authors should present short recommendations about where and how to start to face this critical situation in Latin America to whom it may concern with referee of countries fighting the high HCV infection prevalence in their population.

Answer: This point has been covered in the last section of the manuscript, Page 10-12. Actually, our original remarks are recommendations. To clarify this point we changed the subtitle FINAL REMARKS for RECOMMENDATIONS. Also, some phrases were added to improve these points (Page 11, paragraph 1, line 1; Page 11, paragraph 4, lines 4-10; Page 12, last line.

2. The authors presented key actors not only to the accessibility to HCV treatment but also to the dealing with HCV infection problem in Latin America countries so we believe that the title must be changed and statement of "Accessibility to HCV treatment" should be omitted.

Answer: We have changed the title as requested by the editor to adjust the content of the manuscript.

3. The reviewers believe that brief summary about the current HCV treatment regimen which in use for HCV infected patients in Latin America.

Answer: This information was added on page 7, first paragraph, lines 1-6.

To date, less than 2% of the people infected with HCV have been treated with the standard pegylated-interferon/ribavirin therapy. The new DAAs, such as boceprevir, telaprevir, simeprevir, and sofosbuvir have been slowly licensed in a limited number of countries in LA. Moreover, HCV treatments are based on the US and European guidelines which provide evidence of the SVR obtained in clinical trials carried out in populations other than LA.

4. The paper is written in a very interesting and easy style to the general reader although the presence of long paragraphs which are difficult to be followed.

Answer: The manuscript was improved by proof editing.

5. Page 9; (Each patient must be individually treated since only 60 to 75% of individuals infected with HCV may have positive viral loads.). The statement needs to be clarified.

Answer: This point was clarified in the corresponding paragraph on Page 9.

Each patient should be evaluated before treatment because not all patients that are positive for anti-HCV antibodies have detectable viral loads or have a similar grade of liver damage.

6. Page 8; (However, now that effective antivirals have been introduced, and the

possibility of being favored by the pharmaceutical industry is at hand, medical specialists from different fields now claim the liver-diseased patient, when a specialty or subspecialty in hepatology should be established with access to all doctors and not necessarily to a one specialist.). This paragraph is not clear, please simplify or explained.

Answer: This point was clarified in the corresponding paragraph on Page 9.

However, with the introduction of effective antivirals, and the possibility of the pharmaceutical industry involvement, medical specialists from different fields now claim the liver-diseased patient. Thus, a specialty or subspecialty in hepatology supported by academic institutions should be established as soon as possible.

IV. Language polishing.

We attached the certificate of English language

V. References and typesetting were corrected

We have revised references and typesetting.

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

Best regards,

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