

## Response to the reviewers

Dear reviewers,

Thank you very much for your contribution to our manuscript. In light of your criticism, we have made following changes to the manuscript.

1) Reviewer 1.

a) We have revised the manuscript and included also recommended articles in the review.

Paragraph 1. These results were confirmed in a meta-analysis of five different studies that included fluvastatin, simvastatin, rosuvastatin and pitavastatin. The addition of statin doubled the chance of SVR (OR=2.02, 95% CI: 1.38-2.94) as well as rapid and early viral responses {Zhu, 2013}.

Paragraph 2. The addition of statin to the interferon based therapy has the potential to decrease the degree of fibrosis and the risk of HCC; however, patients with chronic hepatitis C receive statins less frequently compared to patients without HCV infection {Chandra, 2016 #40}. The introduction of direct acting antivirals, with SVR rates up to 100% also in cirrhotics and nonresponders to previous IFN based treatment, limits the benefit of statin treatment in HCV infected patients {Afdhal, 2014 #41; Poordad, 2014 #42; Lawitz, 2015 #43}. However, statins may potentially play a role in other aspects of chronic HCV infection {Zhu, 2013}.

b) Grammatical errors have been corrected. See attached language certificate.

2) Reviewer 2.

No recommendations have been proposed by reviewer 2.

3) Reviewer 3.

We have accepted the grammar changes suggested by reviewer 3.

Peter Jarcuska MD, PhD