Dear Editors,

We would like to thank you and reviewers on the constructive comments and questions for our manuscript**.** We have addressed all of the concerns raised and have revised our manuscript. All changes in the manuscript are highlighted.

Reviewer(s)' Comments to Author:

Reviewer: 2

1. What kind of previous treatments were administered to patients? Peg-IFN? DDA?

Response: We have 9 patients who received previous treatments for HCV and the regimen was PEG-INF plus RIBA. No patients received DDA before. We addressed this question in the results part by adding the following information: "Nine patients received previous treatments for HCV with pegylated interferon (peginterferon) plus ribavirin".

2. Were patients with cirrhosis previously exposed to peginterferon treated with ribavirin? If not, why?

Response: Yes. The patients who had previous treatments for HCV received the same regimen including PEG-INF plus RIBA.

3. How many patients used tenofovir? Were tenofovir levels monitored? Guidelines state this control as mandatory when using tenofovir and ledipasvir.... Some information is described in the discussion section, but no specific analysis or hard data is shown regarding this point

Response: As shown in table 2, we have a total of 20 patients whose anti-HIV regimens included tenofovir. Unfortunately, we didn't monitor tenofovir levels during the treatment. We did monitor the potential side effects which might be related to increased exposure of tenofovir, such as impaired kidney function and no significant changes in GFRs and serum creatinine levels were observed, as stated in the result part "There were no significant changes in estimated GFR (eGFR) or serum creatinine levels over time (Figure 1B-C). No participants were identified as having a treatment-emergent eGFR less than 50 mL/min or a decrease in eGFR (mL/min) greater than 25%".

4. Occult hbv infections is mentioned as "not observed" in discussion...but this is not shown in results!! What HBV serology was obtained? How was the follow up done? For how long?

Response: Agree. Only one patient had prior history of HBV infection with negative HBsAg and anti-HBc before initiating HCV treatment with HARVONI. This patient didn't experience any clinical and laboratory signs of hepatitis flare during the treatment and during post-treatment follow-up for 3 months. However, we didn't repeat HBV serology after the treatment. We realized that the conclusion as "not observed" in discussion may be premature. We removed this conclusion from the discussion part.

Again, we are really grateful to editors and reviewers for pointing out many important issues. We have updated the manuscript according to the Guidelines and Requirements for Manuscript Revision-Retrospective Study. Now we believe that we have edited the whole manuscript thoroughly. We hope that the revised manuscript will meet the standards and lead to publication in WJH.

Respectfully!

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