

July, 17th, 2017

Dear Editors of "**World Journal of Gastroenterology**"

Please find attached our revised manuscript, entitled "**Natural history of covert hepatic encephalopathy: An observational study of 366 cirrhotic patients**" by Wang et al, which we would like to re-submit for your consideration and publication in "**World Journal of Gastroenterology**". We would like to express our sincere thanks to the Reviewers and Editors for their constructive and positive comments aimed at improving the original version of the manuscript.

We have addressed all of the comments raised by the Reviewers and Editors, and the amendments have been highlighted in red in the revised manuscript. All of the authors have read and approved the revised manuscript. We hope you will now find our manuscript of sufficient merit and interest to warrant publication in your Journal. We look forward to hearing from you in due course.

Best Regards,

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Reviewer's opinion

In this manuscript the authors explored the natural history of covert hepatic encephalopathy (CHE) and identified predictors for exacerbation and resolution of CHE, in a 366 cirrhotic patients cohort in a Chinese tertiary care hospital. Patients were enrolled and evaluated for CHE diagnosis. Serum albumin was the sole predictor for developing overt hepatic encephalopathy (OHE) and blood creatinine predicted mortality. Interestingly, they found that CHE could exacerbate, persist or resolve without medication interference in clinically stable cirrhosis. In general the paper is well-written, and the results interesting. Minor changes need to be done for publication, English language needs to be addressed, greek symbols are confusing and so is the English language in some parts of the discussion. L226: space missing between education and the. L234: please replace testings by analysis/ses L323: among is incorrect.

Response: We agree with the reviewer's comments and suggestions. We have revised the manuscript to address all of the points mentioned above. All changes are marked in red in the revised manuscript.