

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 36551

Title: A randomized study of daclatasvir plus asunaprevir in treatment-naïve patients with HCV genotype 1b infection

Reviewer's code: 02447091

Reviewer's country: Japan

Science editor: Ya-Juan Ma

Date sent for review: 2017-12-22

Date reviewed: 2017-12-25

Review time: 2 Days

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input checked="" type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

Lai Wei et al. randomly studied daclatasvir plus asunaprevir in treatment-naïve patients with HCV genotype 1b infection and found that this combination therapy was well-tolerated and SVR12 exceeded the historical SVR rate for peg-interferon plus ribavirin of 70%. This study is well constructed and worth enough for possible publication in WJG if some minor comments listed below are properly responded. Major comments: There are no major comments. Minor comments: 1. Page 1, line 14. I. M. Sechenov is I. M. Sechecov (bold). 2. Page 8, line 5. ... and western countries ... is ... and Western countries... 3. Page 25, Table 2. Due to format mistake, sentences are not on the line between AEs (any grade), >5% box and number of cases. As upper respiratory tract infection spends 2 lines, make blank in the line of 'infection'.



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PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 36551

Title: A randomized study of daclatasvir plus asunaprevir in treatment-naïve patients with HCV genotype 1b infection

Reviewer's code: 02954069

Reviewer's country: Turkey

Science editor: Ya-Juan Ma

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
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		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

This is a well-written and scientific manuscript about the efficacy of daclatasvir and asunaprevir in the treatment of patients with HCV genotype 1b. I have a few comments.

1. The authors compared the results of DUAL treatment to IFN. However, SOF + LDV and 3D are widely used in the treatment of genotype 1b. What are the advantages of DUAL treatment to these treatments?