

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Clinical Cases

**Manuscript NO:** 53207

**Title:** Clinical characteristics and 28-d outcomes of bacterial infections in patients with hepatitis B virus-related acute-on-chronic liver failure

**Reviewer's code:** 03729295

**Position:** Editorial Board

**Academic degree:** DSc, PhD

**Professional title:** Research Scientist

**Reviewer's country:** Mali

**Author's country:** China

**Manuscript submission date:** 2019-12-10

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2019-12-10 15:52

**Reviewer performed review:** 2019-12-16 18:07

**Review time:** 6 Days and 2 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input checked="" type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input checked="" type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

## **SPECIFIC COMMENTS TO AUTHORS**

I would like to make important Specific Comments related your work: 1) We noticed in your study: Original findings: - Pneumonia was the most common site of BIs in patients with ACLF-2 and ACLF-3, and SBP was the most common site of BIs in patients with AD and ACLF-1. - Gram-negative bacteria accounted for the majority of cultured bacteria, and MDROs were common. - The 28-day transplant-free survival rates of patients was very low and decreased with increasing ACLF grade; independent predictors of the 28-day outcomes of the study patients were COSSH-ACLF scores, AKI, BSI, PTA, and invasive catheter. 2) We noticed also: Clinical importance: independent predictors of the 28-day outcomes of first Bacterial infections are enough well documented in patients with hepatitis B virus (HBV)-ACLF as defined by the Chinese Group on the Study of Severe Hepatitis B. Conclusion: summarize appropriately the study data Key problems: - Retrospective cohort study limit (e.g. follow up evaluation) - Small sample size (Power lack) However you have noticed some limitations regarding your work. 3) Future direction: A prospective investigation involving more patients and appropriate design is needed to further elucidate the predictors as you have noticed in the discussion section: “additional prospective randomized studies should be conducted in the future”.

## **INITIAL REVIEW OF THE MANUSCRIPT**

### ***Google Search:***

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No



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***BPG Search:***

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Clinical Cases

**Manuscript NO:** 53207

**Title:** Clinical characteristics and 28-d outcomes of bacterial infections in patients with hepatitis B virus-related acute-on-chronic liver failure

**Reviewer's code:** 03475479

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Lecturer

**Reviewer's country:** Japan

**Author's country:** China

**Manuscript submission date:** 2019-12-10

**Reviewer chosen by:** Le Zhang

**Reviewer accepted review:** 2019-12-13 23:17

**Reviewer performed review:** 2019-12-18 06:44

**Review time:** 4 Days and 7 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input checked="" type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input checked="" type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

#### **SPECIFIC COMMENTS TO AUTHORS**

This article was well-written. Although similar articles about bacterial infection in ACLF were present, this article was interesting and informative regarding with HBV-related ACLF. I have several concerns. 1. How was condition of peroral nutrition intake. Authors should define how to nutritional support. 2. Use of rifaximine, nucleoside analogues, PPIs should be clarified.

#### **INITIAL REVIEW OF THE MANUSCRIPT**

##### ***Google Search:***

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- ☒ No

##### ***BPG Search:***

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☒ No

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Clinical Cases

**Manuscript NO:** 53207

**Title:** Clinical characteristics and 28-d outcomes of bacterial infections in patients with hepatitis B virus-related acute-on-chronic liver failure

**Reviewer's code:** 00503536

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Doctor

**Reviewer's country:** Japan

**Author's country:** China

**Manuscript submission date:** 2019-12-10

**Reviewer chosen by:** Le Zhang

**Reviewer accepted review:** 2019-12-14 04:08

**Reviewer performed review:** 2019-12-22 11:22

**Review time:** 8 Days and 7 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
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			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

## **SPECIFIC COMMENTS TO AUTHORS**

The manuscript written by Li et al. describes the importance of bacterial infection in the prognosis of the patients with HBV-related acute-on-chronic liver failure. Bacterial infections are known to be frequently accompanied by liver failure, but there are few reports on the details of the conditions. Therefore, the manuscript is important for the management of those patients. However, there are some concerns that need to be addressed. Major points, 1. What were the mechanisms of HBV-related acute-on-chronic liver failure in the patients? Was the reactivation of HBV observed in all of those patients? Did the bacterial infections directly contribute the liver failure? The authors should add a comment on that point. 2. Are there any differences in the frequency of bacterial infections or the bacterial types between acute HBV-related liver failure and acute-on-chronic HBV-related liver failure? How about the patients with liver failure of other etiologies, such as acute-on-chronic alcoholic liver failure? 3. What were the causes of death in those patients? Liver failure or bacterial infections?

## **INITIAL REVIEW OF THE MANUSCRIPT**

### ***Google Search:***

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- ☐ Duplicate publication
- ☐ Plagiarism
- ☒ No

### ***BPG Search:***

- ☐ The same title
- ☐ Duplicate publication



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[ Y ] No