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March 25th, 2020

Dear Prof. Ma,

We thank you for providing us the opportunity to re-submit a revised version of our manuscript entitled **“Seroconversion of HBsAG coincides super-infection with hepatitis A: A case report.”** by Beisel *et al.* for consideration for publication in the *World Journal of Gastroenterology/ World Journal of Clinical Cases*.

Reply to editorial comments:

1. Please re-write the Case Presentation section, and update the format of the manuscript, include the title (no more than 12 words), title page, main text, and footnotes, according to the Guidelines and Requirements for Manuscript Revision which can be downloaded at <https://www.wjgnet.com/bpg/GerInfo/291>.

Answer: This was done accordingly.

2. Please make an audio core tip file describing your final core tip. Please submit audio files according to the following specifications:

Answer: We have now registered the Audio Core tip and this has been uploaded with the revised manuscript.

3. Please provide the author contributions. The format of this section should be like this: Author contributions: Wang CL and Liang L contributed equally to this work; Wang CL, Liang L, Fu JF, Zou CC, Hong F and Wu XM designed research; Wang CL, Zou CC, Hong F and Wu XM performed research; Xue Jz and Lu JR contributed new reagents/analytic tools; Wang CL, Liang L and Fu JF analyzed data; and Wang CL, Liang L and Fu JF wrote the paper.

Answer: We now included the author contributions in the title page.

4. Please provide the PubMed numbers and DOI citation numbers to the reference list and list all authors of the references. Please revise throughout. The author should provide the first page of the

paper without PMID and DOI numbers. NOTE: The PMID is required, and NOT the PMCID; the PMID number can be found at <https://pubmed.ncbi.nlm.nih.gov>. (Please begin with PMID:) The DOI number can be found at <http://www.crossref.org/SimpleTextQuery/>. (Please begin with DOI: 10.**). Please verify that the references are cited by Roman numerals in square brackets and superscripted in the text, and that the numbering order is correct. There should be no space between the bracket and the preceding word or the following punctuation. When references in the text and tables are cited with author name(s), it is necessary to manually verify that the name(s) is consistent with the first author's surname in the corresponding reference list.

Answer: We now up-dated the PubMed numbers and DOI citation numbers to the reference list.

Reply to reviewer's comments:

Reviewer's comment #1 ID 02860516:

"This is an intersting and rare case report suggesting that acute HAV super-infection may trigger sustained clearance of HBs-Ag in patients with chronic HBV infection. I agree with author's comment about the critical importance of regular reviews of the vaccination status of patients with chronic HBV infection. No specific comments."

Answer: We thank the reviewer for the overall positive assessment of our case report.

Reviewer's comment #2 ID 02861305:

"HBsAg may also become negative due to mutation in cirrhosis patients. It should be mentioned in the discussion."

Answer: We thank the reviewer for this important comment. We now mentioned the possibility of a spontaneous mutation in cirrhotic patients in the discussion (highlighted in yellow).

Reviewer's comment #3 ID 02951945:

"1 Title. appropriate 2 Abstract. yes, appropriate 3 Key words. yes, appropriate 4 Background. yes appropriate 5 Methods. case report 6 Results. yes, appropriate 7 Discussion. yes, appropriate- more detailed discussion of possible immune mechanism behind this unusual behavior is required 8 Illustrations and tables. nil, case report 9 Biostatistics. nil, case report 10 Units. yes, appropriate 11 References. yes, appropriate 12 Quality of manuscript organization and presentation. concise and coherent 13 Research methods and reporting. case report has followed required specifications 14 Ethics statements. yes, appropriate Manuscript Peer-Review Specific Comments To Authors: Well written case report, but this must be considered as an incidental case in my opinion. Unless there are different case reports and longitudinal studies available it is not appropriate to make any assumptions of probability of unspecific immune reactions leading to functional cure of hepatitis B. Hepatitis B is known to get suppressed with coinfection with hepatitis C and hepatitis D, which is known in literature, this could be a rare para viral phenomenon specific for hepatitis B. However, such a response to acute hepatitis A is not known. As authors have already highlighted patients with cirrhosis should have immunization for hepatitis A (and for B in non-hepatitis B related cases) checked and updated The case report is important because it represents an unusual coincidence. It would be helpful if you could describe in more detail the plausible immune response behind this function cure."*

Answer: We would like to thank the reviewer for the overall positive assessment of our manuscript. To address this point by the reviewer, we now described a possible immune response of this functional cure (highlighted in yellow).

We have now carefully revised the manuscript according to the reviewers' comments. We greatly appreciate the constructive feedback the reviewers, and believe that these revisions have further strengthened the manuscript. We hope that the revised manuscript can now be accepted for publication.

Kind regards,
PD Dr. Julian Schulze zur Wiesch, MD