

Dear Sir, it is of great honor to accept our paper for revision, we thank you for your great efforts that added much to our knowledge

Manuscript NO.: 56310

**(3) *Special requirements for figures:***

**Response:** they were corrected

**(4) *Special requirements for tables:*** Tables must be presented in the order that they appear in the main text of the manuscript (numbered as 1, 2, 3, *etc.*). Please verify that the tables are referred to in the text by their respective Roman numerals and that the numbering order is correct, and format the tables. Please verify that there are no missing or multiple spaces in the text and tables, *e.g.* before or after parentheses, between words, or before or after symbols like +, ×, ±, <, >, ≥, and ≤. Please verify that the special words or letters in the text and tables are correct, *e.g.* *P* (uppercase), *n* (lowercase), *via*, *vs* (lowercase, no punctuation), *in vivo*, *in vitro*, and *et al* (no punctuation) are italicized.

**Response:** they were corrected

**(5) *Special requirements for references***

**Response:** they were corrected

**(6) *Special requirements for article highlights:***

**Response:** they were modified

**(8) *Approved grant application form(s) or funding agency copy of any approval document(s):***

N/A

**Step 5: Peer-review report(s)**

**Reviewer #1:**

**Scientific Quality:** Grade C (Good)

**Language Quality:** Grade B (Minor language polishing)

**Conclusion:** Minor revision

**Specific Comments to Authors:** Authors evaluated the potential correlation of the changes in lipid profile, carotid intima media thickness (CIMT), ankle brachial index with severity of fibrosis, grades of esophageal varices, and fibrosis indices, because of hepatitis C virus

(HCV) infection affects on lipid metabolism through enhancing the circulating levels of inflammatory cytokines, together with its impact on endothelial function. The data showed that VLDL ( $P=0.001$ ), LDL/platelets ratios ( $P=0.001$ ), CIMT ( $P=0.001$ ), ABI ( $P=0.001$ ) were the main parameters associated with significant fibrosis, EVs and endothelial dysfunction. CIMT and LDL/platelet ratio were predictive of advanced fibrosis and esophageal varices at cutoff values 1.1 mm and 1 respectively, with AUC 0.966 & 0.960, while VLDL, ABI at cutoff 16.5 mg/dl, 0.94 were predictive of advanced fibrosis and esophageal varices with AUC 0.891, 0.823 respectively ( $p=0.001$ ), indicated CIMT, ABI, VLDL, LDL/ platelet ratio should be non-invasive biomarkers of advanced fibrosis, presence of esophageal varices and endothelial dysfunction in liver cirrhosis.

### **Response:**

Thanks sir for your notes, the errors in language were corrected

Reviewer #2:

**Scientific Quality:** Grade C (Good)

**Language Quality:** Grade B (Minor language polishing)

**Conclusion:** Minor revision

**Specific Comments to Authors:** The definition of acronyms should be written. The English language of the text needs a minor revision.

### **Response**

The definition of acronyms was added. The English language of the text was revised.

### **Step 6: Editorial Office's comments**

**(1) Science Editor:** 1 Scientific quality: The manuscript describes an observational study of the novel markers of endothelial dysfunction in HCV related cirrhosis. The topic is within the scope of the WJH. (1) Classification: Grade C and Grade C; (2) Summary of the Peer-Review Report: The authors evaluated the potential correlation of the changes in lipid profile, carotid intima media thickness, ankle brachial index with severity of fibrosis, grades of esophageal varices, and fibrosis indices. However, the definition of acronyms should be written.

**(2) RESPONSE: it was added**

The English language of the text needs a minor revision; and (3) Format: There are 4 tables and 4 figures. A total of 38 references are cited, including 3 references published in the last 3 years. There are no self-citations. 2 Language evaluation: Classification: Grade B and Grade B. A language editing certificate was not provided.

**Response: errors were corrected and editing certificate was provided.**

3 Academic norms and rules: The authors provided the Biostatistics Review Certificate, the signed Conflict-of-Interest Disclosure Form and Copyright License Agreement, the Institutional Review Board Approval Form, the Written informed consent, and the STROBE Statement. No academic misconduct was found in the CrossCheck detection and Bing search. 4 Supplementary comments: This is an invited manuscript. The topic has not previously been published in the WJH.

5 Issues raised: (1) The “Author Contributions” section is missing. Please provide the author contributions;

**Response: it was provided.**

(2) The authors did not provide original pictures. Please provide the original figure documents. Please prepare and arrange the figures using PowerPoint to ensure that all graphs or arrows or text portions can be reprocessed by the editor;

**Response: they were provided.**

(3) PMID and DOI numbers are missing in the reference list. Please provide the PubMed numbers and DOI citation numbers to the reference list and list all authors of the references.

**Response: they were provided.**

Please revise throughout; and (4) The “Article Highlights” section is missing. Please add the “Article Highlights” section at the end of the main text.

**Response: they were provided.**

6 Re-Review: Not required. 7 Recommendation: Conditional acceptance.

**(2) Editorial Office Director:** I have checked the comments written by the science editor.

**(3) Company Editor-in-Chief:** I have reviewed the Peer-Review Report, the full text of the manuscript and the relevant ethics documents, all of which have met the basic publishing requirements, and the manuscript is conditionally accepted with major revisions. I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report and the Criteria for Manuscript Revision by Authors.

**We thank you sir for your valuable advices which added to our knowledge.**

**Much obliged**

**Amr Hanafy**