

PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

Manuscript NO: 57194

Title: Management of hepatitis C in children and adolescents during COVID-19 pandemic

Reviewer's code: 05095017

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Assistant Professor

Reviewer's Country/Territory: Japan

Author's Country/Territory: Poland

Manuscript submission date: 2020-05-28

Reviewer chosen by: AI Technique

Reviewer accepted review: 2020-05-28 10:19

Reviewer performed review: 2020-06-01 02:12

Review time: 3 Days and 15 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

Pokorska-Śpiewak M et al. reviewed the current status of antiviral treatment of HCV for children and adolescents and recommendation of patient care for children and adolescents under the COVID-19 pandemic. This is an interesting topic and will draw the attention of the readers. With that being said, I would suggest a few modifications to improve the manuscript. Major comments: 1) The title "Antiviral treatment of hepatitis C in children and adolescents during COVID-19 pandemic" does not reflect the main subject of this manuscript adequately. The main idea of this manuscript is about "management" of pediatric patients during COVID-19 pandemic and not "treatment". 2) Page 5 Line 8, The authors stated " Only three DAA regimens have been approved for use in adolescents by the European Medicines Agency (EMA) in Europe", and sofosbuvir/ledipasvir, sofosbuvir with ribavirin and glecaprevir/pibrentasvir (age between 12 to 17) come under this classification. However, after that (Line 14) , the authors mentioned that sofosbuvir/ledipasvir and sofosbuvir with ribavirin (age between 3 to 11),and sofosbuvir/velpatasvir (as young as 6 years of age or weighing at least 17 kg) are approved by FDA. In my understanding, these two kinds of regimens are approved in US but not in Europa, but this is a bit confusing. Please make them clear. 3) Page 7, "Management of pediatric patients with CHC during the COVID-19 pandemic" I understand that this is a review and the number of references for this topic is limited. However, suggestions/recommendations for the management/treatment specific to pediatric patients are not sufficient. For example, if you have experienced some difficulties in the management of pediatric patients under this situation, sharing such experiences will be helpful for the readers. Minor comments: 1) Page 4. subtitle" Antiviral treatment of HCV infection" does not reflect the main subject of this section. 2) Please add references in Table 1.

PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

Manuscript NO: 57194

Title: Management of hepatitis C in children and adolescents during COVID-19 pandemic

Reviewer's code: 00009848

Position: Editor-in-Chief

Academic degree: FAASLD, MD

Professional title: Director, Professor

Reviewer's Country/Territory: United States

Author's Country/Territory: Poland

Manuscript submission date: 2020-05-28

Reviewer chosen by: AI Technique

Reviewer accepted review: 2020-05-30 23:44

Reviewer performed review: 2020-06-08 03:51

Review time: 8 Days and 4 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

This MS is a timely review on managing hepatitis C in children and adolescents during COVID-19 pandemic. The MS emphasized several efforts that can be made by pediatric hepatologists to prioritize patient care in children with CHC, including promoting telemedicine in the outpatient setting, using local laboratory testing for follow-up visits, and engaging in the home delivery of DAAs for patients under antiviral therapy whenever possible. I would like to have following comments: 1. Several professional societies, like AASLD and EASL have published their recommendations on hepatology practice during covid-19 pandemic, including hepatitis C. These should be referenced. 2. The session “Coronavirus disease 2019 (COVID-19) and the liver” was too brief and incomplete. For instance, mild LFTs elevation is commonly seen (37.2%; 15% to 53%) in covid-19 patients (Liver International. 2020; 40:998). 3. My main concern is several other key efforts are missing in this MS (comments 3-6). First, CHC patient education on risk and precaution on covid-19 should be included. That is patients with hepatitis C, especially complicated by cirrhosis and end-stage liver disease could be more at risk of having a bad reaction to the virus that causes COVID-19. 4. Another key question is whether CHC patients undergoing HCV treatment should be screened for covid-19 before starting DAA treatment. What are current societies recommendation? 5. Likewise, it should be addressed if we need to assess family history of ongoing covid-19, that will increase risk and possible interruption of DAA treatment. 6. Perhaps, the priority of DAA treatment should also be determined before planning DAA treatment, as DAA treatment may be safely postponed to after covid-19 pandemic in those with stable CHC. 7. In page 6, para2, line 5, “In April... ” should be “In March...”.

RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Position: Editorial Board

Academic degree: MD, PhD

Professional title: Assistant Professor

Reviewer's Country/Territory: Japan

Author's Country/Territory: Poland

Manuscript submission date: 2020-05-28

Reviewer chosen by: Le Zhang

Reviewer accepted review: 2020-07-14 07:42

Reviewer performed review: 2020-07-14 10:10

Review time: 2 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS



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The revised manuscript is much improved; the authors have addressed my issues. I would like to recommend this manuscript for publication in present form.