



## PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 59260

**Title:** Liver fibrosis index-based nomograms for identifying esophageal varices in chronic hepatitis B related cirrhosis

**Reviewer's code:** 02832062

**Position:** Peer Reviewer

**Academic degree:** FACC, FRCS, MD, PhD

**Professional title:** Professor, Senior Scientist

**Reviewer's Country/Territory:** United States

**Author's Country/Territory:** China

**Manuscript submission date:** 2020-09-02

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2020-09-04 08:15

**Reviewer performed review:** 2020-09-08 01:18

**Review time:** 3 Days and 17 Hours

<b>Scientific quality</b>	<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 Grade E: Do not publish
<b>Language quality</b>	<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
<b>Conclusion</b>	<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
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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## **SPECIFIC COMMENTS TO AUTHORS**

Title: LFI-based Nomograms for identifying esophageal varices in chronic hepatitis B related cirrhosis. The manuscript deals with an interesting and important argument, predict the risk and severity of EV in patients with CHB related cirrhosis. The topic has a clinical relevance since Both nomograms were more efficient than LFI, SPI, PSR, King's score and Lok index in training and validation cohorts, and can be clinically used for diagnosing EV and making clinical interventions. The manuscript is well written: the title reflects the main subject of the article, abstract and keywords well summarize the arguments. The methodology is described in detail and is well structured. The discussion is well articulated according to results and the authors have clearly underlined the limitations and drawbacks of the manuscript. A point of strength of the article in my opinion is also the nomogram, that could be a useful tool for clinicians to predict the treatment outcome, and thus contribute to identifying esophageal varices in chronic hepatitis B related cirrhosis. The tables/figures are representatives and of good quality. The manuscript cites appropriately the latest and authoritative references.



## PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 59260

**Title:** Liver fibrosis index-based nomograms for identifying esophageal varices in chronic hepatitis B related cirrhosis

**Reviewer's code:** 01490079

**Position:** Peer Reviewer

**Academic degree:** FCPS, MBBS, MD, PhD

**Professional title:** Professor, Research Associate

**Reviewer's Country/Territory:** Netherlands

**Author's Country/Territory:** China

**Manuscript submission date:** 2020-09-02

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2020-09-04 08:14

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**Review time:** 4 Days and 17 Hours

<b>Scientific quality</b>	<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
<b>Language quality</b>	<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
<b>Conclusion</b>	<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
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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

"LFI-based Nomograms for identifying esophageal varices in chronic hepatitis B related cirrhosis" is an interesting article. Authors' findings are not only innovative, but also important as this is the first study to construct nomograms integrating clinical and ultrasonic parameters to predict the risk and severity of EV. The authors nomograms showed a strong discriminative ability and a clinical net benefit compared with other indexes. These predictive nomograms are useful for clinicians to make preventive and therapeutic measures. Overall, it is a good work. However, I think some modifications concerning language and layout (not exactly compliant BPG guidelines) would be necessary before publication.



## PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 59260

**Title:** Liver fibrosis index-based nomograms for identifying esophageal varices in chronic hepatitis B related cirrhosis

**Reviewer's code:** 02282572

**Position:** Peer Reviewer

**Academic degree:** FEBS, MD, PhD

**Professional title:** Chief Physician, Professor, Research Scientist, Senior Lecturer

**Reviewer's Country/Territory:** Germany

**Author's Country/Territory:** China

**Manuscript submission date:** 2020-09-02

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2020-09-08 00:27

**Reviewer performed review:** 2020-09-09 01:47

**Review time:** 1 Day and 1 Hour

<b>Scientific quality</b>	<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
<b>Language quality</b>	<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
<b>Conclusion</b>	<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
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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

Thank you very much for asking me to review this manuscript by SH Xu et al. In this study, the authors constructed two nomograms integrating clinical and ultrasonic indicators for determining the risk and severity of EV in patients with CHB related cirrhosis. Clinical and ultrasonic parameters which were closely related to EV risk and severity were screened out by univariate and multivariate logistic regression analyses, and integrated into two nomograms, respectively. Both nomograms were internally and externally validated with calibration, C-index, ROC curve and DCA. Authors concluded that nomograms incorporating clinical and ultrasonic variables are efficient in noninvasively predicting the risk and severity of EV. The manuscript is well written and contents are novel and worth publication in WJG, which would add value to the current established knowledge and evidence. Please discuss in more detail predicting the risk and severity of EV in patients with CHB related cirrhosis.