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## PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology Manuscript NO: 62301 **Title:** Learning from a rare phenomenon – spontaneous clearance of chronic hepatitis C virus post-liver transplant: A case report Provenance and peer review: Unsolicited manuscript; Externally peer reviewed Peer-review model: Single blind Reviewer's code: 05424290 **Position:** Editorial Board Academic degree: MBBS, MD Professional title: Academic Research, Doctor, Professor Reviewer's Country/Territory: India Author's Country/Territory: Canada Manuscript submission date: 2021-01-06 Reviewer chosen by: AI Technique Reviewer accepted review: 2021-01-06 10:33 Reviewer performed review: 2021-01-19 12:59 Review time: 13 Days and 2 Hours

| Scientific quality | <ul> <li>[ ] Grade A: Excellent [Y] Grade B: Very good [ ] Grade C: Good</li> <li>[ ] Grade D: Fair [ ] Grade E: Do not publish</li> </ul>    |
|--------------------|---|
| Language quality   | [Y] Grade A: Priority publishing [] Grade B: Minor language polishing<br>[] Grade C: A great deal of language polishing [] Grade D: Rejection |
| Conclusion         | [Y] Accept (High priority) [] Accept (General priority)<br>[] Minor revision [] Major revision [] Rejection                                   |
| Re-review          | [ ]Yes [Y]No  |

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## Baishideng **Publishing**

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| Peer-reviewer | Peer-Review: [Y] Anonymous [] Onymous |
|---------------|---------------------------------------|
| statements    | Conflicts-of-Interest: [ ] Yes [Y] No |

## SPECIFIC COMMENTS TO AUTHORS

First, the case report includes three different cases on timeline with chronic hepatitis C related cirrhosis undertaken for liver transplant with spontaneous resolution of HCV infection over next few years. These cases date back to interferon era when antiviral therapy especially in decompensated HCV cirrhosis was contraindicated and post liver transplant status was challenging due to psychiatric side effects of interferons and interactions with other drugs. The hypothesis put forward suggests that probably due to immune activation during rejection episodes and other infections in post liver transplant status, spontaneous resolution of HCV happens. Second, the manuscript is written in a systematic manner and is properly framed. However no methodology has been used to identify the key immune responses responsible for possible spontaneous resolution of HCV infection. Third, the DAA era has opened a new insight into the management of all CHC patients including decompensated cirrhosis and post liver transplant with high SVR rates. And today we don't need to wait for spontaneous resolution of HCV infection. However, the cases are interesting to note for future reference and for better understanding the immune mechanisms of human body towards viral infections at different stages of disease.