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Dear Professor Lian-Sheng Ma,

Thank you for allowing us to re-submit our “**Acute Kidney Injury and Hepatorenal Syndrome in Cirrhosis**” manuscript (Manuscript Number 62955). As instructed, I have submitted the manuscript. We have considered the reviewers’ feedback very carefully, and we addressed each point in detail below.

As for the editor’s recommendations, we changed all of our references to comply with the World Journal of Gastroenterology and updated the references. We submitted our tables and original figures in the correct form.

We look forward to your response and hope we can contribute to this highly regarded journal.

Best Regards,

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Responses to Reviewers' Comments

Reviewer #1:

- The authors have produced a timely and well written review of acute kidney injury associated with both chronic and acute liver disease.

Thank you.

- They have reviewed the current literature and produced a comprehensive review of the clinically relevant facts available.

Thank you, and we agree with your comment.

- This review will help clinicians with a more general practice to assess and manage patients with acute kidney injury associated with liver disease and in addition discriminate true HRS from other causes of AKI.

We agree with your interpretation of the paper.

- The manuscript is well written and has few grammar or typographical errors. The manuscript is deserving of publication and will provide a useful addition to the published literature.

Thank you for your complimentary review of our paper. We fixed the major grammar or typographical errors. We changed certain words and sentences less verbose. We changed sentence structure to avoid passive voice as much as possible without changing the integrity of the paper.

Reviewer 2:

- The manuscript is interesting. Title is Acute Kidney Injury and Hepatorenal Syndrome in Cirrhosis, and abstract mentioned that this article reviews the current guidelines and recommendations of AKI in cirrhosis.

Thank you for your interest and recommendations to improve the article.

- However, it requires some answers to comments about the novelty of the references.

We updated the biomarker section as suggested.

- There are enough references in this review, a complete description of the evidence, detailed and appropriate integration, but some aspects seem to lack novelty.

Our revisions in multiple sections incorporate novel literature.

- For example, see Table 4 The most well-known novel biomarkers being studied for AKI in cirrhosis. The references are from 64 to 89, but less than 5 in the last 5 years.

We agree with this comment. We were able to update the references. Specifically, for NGAL, we added references 67, 68, 77, and 78. For IL-18, we added reference 78. For L-

FAFB, we added references 91, 93, and 94. We updated the tables as well and with the information gleaned in those references, we were able to update our table as well.

- It would be better if there were more references in the last 5 years.

Thank you. We were able to add more references within the last 5 years in other sections as well, specifically in prognosis and management. However, as with the biomarker section, we were limited to studies with strong data and high-quality. Specifically, for the management section, we added references 112, 113, 114, and 117. For the prognosis section, we added references 149, 150, and 151.