

Dear Editor

Thank you for your kind consideration of our manuscript (Manuscript NO.: 64710R1). The manuscript has been revised along the suggestions of the reviewer and the editorial office. We have appreciated their thoughtful and helpful review that has helped strengthen the manuscript. Enclosed is a point-by-point response addressing each of the comments of the reviewer and the revised manuscript.

We hope that the manuscript is now acceptable for publication. Please do not hesitate to contact me if there are any questions.

Sincerely,

Chien-Ching Hung

Department of Internal Medicine

National Taiwan University Hospital

Taipei, Taiwan

E-mail address: [hcc0401@ntu.edu.tw](mailto:hcc0401@ntu.edu.tw)

Telephone: +886-2-23123456 ext. 67552

## Responses to the Reviewers

We thank the reviewers for their helpful review and valuable insights.

Reviewer #1:

**Comment 1:** Sun HY et al reported at SVR12 93.5% and 91.2% virological response in the intention to treat analysis and 97.5% (157/161), 94.8% (165/174) by SOF-based or SOF-free regimens in the per-protocol analysis. Have you tested the predictors of non-virological response in your cohort? Was liver cirrhosis at baseline a predictor of non-virological response?

**Reply:** Thank you for the comment. In the intention-to-treat analysis, the SVR12 of PLWH receiving SOF-based and SOF-free regimens were 93.5% (157/168) and 91.2% (165/181), respectively. In the per-protocol analysis, their SVR12 were 97.5% (157/161) and 94.8% (165/174), respectively. The non-virological responses of PLWH with and without liver cirrhosis receiving SOF-based and SOF-free regimens in the intention-to-treat and per-protocol analysis are presented as follows. Given the small numbers (4 PLWH receiving SOF-based regimen and 9 PLWH receiving SOF-free regimen) of patients having non-virological response in our cohort, these results were not shown in the manuscript.

Non-virological responses, n/N (%)	Liver cirrhosis	Non-liver cirrhosis	P value
Intention-to-treat analysis			
SOF-based regimen	1/29 (3.4)	3/139 (2.2)	0.533
SOF-free regimen	1/9 (11.1)	8/172 (4.7)	0.818
Per-protocol analysis			
SOF-based regimen	1/28 (3.6)	3/133 (2.3)	0.387
SOF-free regimen	1/9 (11.1)	8/165 (4.8)	0.538

**Comment 2:** Please clarify in the methods section that baseline means at treatment initiation.

**Reply:** Thank you for the comment. The meaning of baseline was clarified in Methods in the 2<sup>nd</sup> paragraph on Page 10 as follows, "Serum samples to determine HCV RNA load were obtained at baseline (that is, at DAAs initiation), EOT, and 12 weeks off-therapy".

**Comment 3:** Minor comments:

- Page 14: "improvement of transaminitis" consider rewording with "improvement of elevated serum transaminases"

**Reply:** Thank you for the suggestion. "improvement of transaminitis" is replaced with "improvement of elevated serum transaminases" as suggested in the 4<sup>th</sup> paragraph on Page 14.

- Page 43, Table 1: Please correct "HBV RNA" to "HBV DNA" Thank you  
**Reply:** Thank you for the correction. "HBV RNA" is corrected to "HBV DNA" in Table 1.

Science editor:

**Comment 1:** Please fill out the STROBE checklist with page numbers.

**Reply:** Thank you for the comment. The STROBE checklist is filled out with page numbers.

Company editor-in-chief:

**Comment 1:** I have reviewed the Peer-Review Report, full text of the manuscript, and the relevant ethics documents, all of which have met the basic publishing requirements of the World Journal of Gastroenterology, and the manuscript is conditionally accepted. I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report, Editorial Office's comments and the Criteria for Manuscript Revision by Authors.

**Reply:** Thank you for the comment.