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PEER-REVIEW REPORT

Name of journal: *World Journal of Gastroenterology*

Manuscript NO: 68623

Title: Risk of hepatocellular carcinoma after hepatitis C virus cure

Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 02832130
Position: Peer Reviewer
Academic degree: MD
Professional title: Doctor
Reviewer's Country/Territory: China
Author's Country/Territory: United States

Manuscript submission date: 2021-05-29

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-05-29 05:02

Reviewer performed review: 2021-06-05 03:17

Review time: 6 Days and 22 Hours

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Language quality	[Y] Grade A: Priority publishing [ ] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	[ ] Accept (High priority) [ ] Accept (General priority) [Y] Minor revision [ ] Major revision [ ] Rejection
Re-review	[Y] Yes [ ] No
Peer-reviewer	Peer-Review: [Y] Anonymous [ ] Onymous

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statements	Conflicts-of-Interest: [ ] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Name of Journal: World Journal of Gastroenterology Manuscript Type: REVIEW Title: Risk of hepatocellular carcinoma after HCV cure Manuscript No. 68623 Comments： The authors of this manuscript reviewed the pathogenesis and risk factors of HCC after HCV cure, and the applications of noninvasive modalities and models to predict HCC. Their results indicated that in the DAA era, the development of HCC remains a significant concern especially among those with advanced hepatic fibrosis. A number of factors including diabetes mellitus, underlying NAFLD and alcohol consumption have been associated with progression to HCC after HCV cure. Promising HCC predictive models are being developed but most require validation and standardization. The subject of this manuscript is of value, but there are defects need to be modified. 1. When abbreviations appear for the first time, it is better to provide the full name, for example: INTRODUCTION section: NHANES, Natural History of Hepatitis C virus Infection section: MSM, Hepatic Steatosis and NAFLD section：NAFLD，etc. Please check and modify. 2.Regression of fibrosis after DAA therapy section： ..... non-invasive modalities have been developed to monitor hepatic fibrosis. It is suggested that the author provide some references after the sentence. 3.Pathogenesis of HCC after HCV Cure section： A number of key pathways are involved in the development of HCV-related HCC: (a) fibrosis due to continuous necrosis (b) immune-surveillance failures attributable to persistent viral replication with immune system escape mechanisms and (c) direct carcinogenic Is there a lack of punctuation here. Please check. 4.The reference number should precede the punctuation. Please check. 5.Figures: Good.

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Manuscript NO: 68623

Title: Risk of hepatocellular carcinoma after hepatitis C virus cure

Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06087152
Position: Peer Reviewer
Academic degree: MD, PhD

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: United States

Manuscript submission date: 2021-05-29

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-05-30 15:09

Reviewer performed review: 2021-06-06 12:44

Review time: 6 Days and 21 Hours

Scientific quality	[ ] Grade A: Excellent [Y] Grade B: Very good [ ] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Language quality	[Y] Grade A: Priority publishing [ ] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	[Y] Accept (High priority) [ ] Accept (General priority) [ ] Minor revision [ ] Major revision [ ] Rejection
Re-review	[Y] Yes [ ] No
Peer-reviewer	Peer-Review: [ ] Anonymous [Y] Onymous

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statements	Conflicts-of-Interest: [ ] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Specific Comments to Authors: The authors focus on the risk of hepatocellular carcinoma after HCV cure. The manuscript described firstly the background of HCV and HCV-related HCC, history of HCV infection and present status of HCV therapy. Secondly, the risks of HCV-related HCC were mainly focused, including lack of fibrosis regression, steatosis and NAFLD, diabetes mellitus, and alcohol, as well as analyzed pathogenesis of HCC after HCV cure. Lastly, HCV cured patient identification with HCC risk and assessment methods (FIB-4, APRI, elastography) were discussed adequately. It is very interesting, since the non-invasive modalities for evaluation of HCC risks is becoming a hot-point in the field of liver cancer imaging. Thereby, the manuscript could be accepted by World Journal of Gastroenterology from my point. Minor revision As for the hepatitis-related HCC, no matter HCV or HBV, predictive modalities for surveillance should be highlighted and developed. In order to promote the validation and standardization of theses non-invasive modalities, as my personal suggestion, the explicit description and difference comparison should be further explored between fibrosis markers (FIB-4, APRI) and elastography (SWE and VCTE) and between themselves, respectively. Jinshun Xu PhD Department of Ultrasound Medicine West China Hospital of Sichuan University