

PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 70654

Title: Longitudinal Assessment of Liver Stiffness by Transient Elastography for Chronic Hepatitis C Patients

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 04072104

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Chief Doctor, Doctor, Occupational Physician, Research Scientist

Reviewer's Country/Territory: Japan

Author's Country/Territory: United States

Manuscript submission date: 2021-08-10

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-08-17 08:40

Reviewer performed review: 2021-08-24 13:03

Review time: 7 Days and 4 Hours

Scientific quality	<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 Grade E: Do not publish
Language quality	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<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
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No



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Peer-reviewer statements	Peer-Review: [<input checked="" type="radio"/>] Anonymous [<input type="radio"/>] Onymous Conflicts-of-Interest: [<input type="radio"/>] Yes [<input checked="" type="radio"/>] No
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SPECIFIC COMMENTS TO AUTHORS

It is an interesting manuscript about “Longitudinal Assessment of Liver Stiffness by Transient Elastography for Chronic Hepatitis C patients”. My concern is determined in the following points. Cirrhosis regression is not only about fibrosis regression but also reversal of vascular and parenchymal abnormalities. The best evidence and definition of regression of cirrhosis will be based on the assessment of long-term clinical outcomes. Further longer time (a few years) follow-up of this cohort with histological, hemodynamic, elastographic, and clinical data, stratified by stage of liver disease, will provide invaluable data toward regression of HCV cirrhosis. Above mentioned should be referred to.