

PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

Manuscript NO: 72491

Title: Interrelationship between physical activity and depression in nonalcoholic fatty

liver disease

Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05081677

Position: Peer Reviewer

Academic degree: MD

Professional title: Associate Professor

Reviewer's Country/Territory: Greece

Author's Country/Territory: United States

Manuscript submission date: 2021-10-19

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-10-19 20:34

Reviewer performed review: 2021-10-28 20:29

Review time: 8 Days and 23 Hours

| Scientific quality | [] Grade A: Excellent [] Grade B: Very good [] Grade C: Good [Y] Grade D: Fair [] Grade E: Do not publish |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



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

SPECIFIC COMMENTS TO AUTHORS

This is an interesting study, aiming to identify the relationship between NAFLD, physical inactivity and depression. Unfortunately, the study design is prone to some risk of bias. It has a retrospective nature and the study period is old. There is no objective method of assessment of physical activity and the Beck Depression Inventery I was used instead of the newer one. There are no biopsies and the complete exclusion of viral hepatitis is unclear (eg HCV was discovered in 1990). The most important problem is that there is no objective evidence of NASH. Despite all these limitations, the study presents some important findings.



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Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05040445

Position: Editorial Board

Academic degree: MD

Professional title: Associate Professor, Chief Physician, Professor

Reviewer's Country/Territory: China

Author's Country/Territory: United States

Manuscript submission date: 2021-10-19

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-11-05 12:43

Reviewer performed review: 2021-11-08 14:54

Review time: 3 Days and 2 Hours

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



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

SPECIFIC COMMENTS TO AUTHORS

The present study aimed to investigate in the interrelationship between physical inactivity and depressive symptoms in individuals with NAFLD. And they came to the conclusion that individuals with NAFLD were more likely f physical inactivity, and more likely coexisted with depressive symptoms. The topic is interesting, however, I have some concerns as follow: 1. the study population was 1992-1996 and they reported a very high prevalence of 39.9% by the hepatic steatosis index, I just wonder such a high prevalence (even more higher than nowadays) may be impossible during 1992-1996. What is the potential reason for this? the certain population or the low specificity of the index? 2. Those index is widely used in large population, however, the present population is not so large and it is better to diagnosis the NAFLD by other direct method at least by the ultrasound. 3. what about the prevalence of NAFLD in female? Seemed not balanced. 4. It is easy to understand that the inactive people tend to get NAFLD, so the most important thing should to investigate is why NAFLD people tend to be depressive?



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Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05769246

Position: Peer Reviewer

Academic degree: MD

Professional title: Professor

Reviewer's Country/Territory: Egypt

Author's Country/Territory: United States

Manuscript submission date: 2021-10-19

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-11-02 12:02

Reviewer performed review: 2021-11-09 10:59

Review time: 6 Days and 22 Hours

| Scientific quality | [] Grade A: Excellent [Y] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish |
|--------------------|--|
| Language quality | [] Grade A: Priority publishing [Y] 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 |
|---------------|---------------------------------------|
| statements | Conflicts-of-Interest: [] Yes [Y] No |

SPECIFIC COMMENTS TO AUTHORS

A nice and to the point study with some recommendations : What is the gap of knowledge? What are the primary and secondary outcomes of the study Methods:3) hyperlipidemianot 4 Abstract and discussion :A lot of grammar and spelling mistakes to be corrected and English editing to be revised. Results: BDI score better to be mentioned as median not mean Discussion: A very poor discussion, lacking correlation with what is already known about the study Conclusion: should be the same in the abstract and discussion