



PEER-REVIEW REPORT

Name of journal: *World Journal of Gastroenterology*

Manuscript NO: 73384

Title: Autoimmune liver diseases in systemic rheumatic diseases

Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05910182

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Israel

Author's Country/Territory: Taiwan

Manuscript submission date: 2021-12-10

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-12-12 05:50

Reviewer performed review: 2021-12-15 07:55

Review time: 3 Days and 2 Hours

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 Grade A: Excellent [] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish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



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

SPECIFIC COMMENTS TO AUTHORS

This is an excellent review and I think it is important for practicing gastroenterologists and hepatologists. The traditional levels of elevated ALT are no longer accepted with an ULN of 19 for women. How would this change the liver involvement in autoimmune disease? Checkpoint inhibitors can produce immune liver damage and other immune diseases. Perhaps some comment on this area which will increase in the near term future. I think a comment about the high level of serum ferritin in Stills disease is necessary in order to avoid unnecessary Ix of hemochromatosis.



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Reviewer's code: 05266965

Position: Peer Reviewer

Academic degree: MD

Professional title: Consultant Physician-Scientist

Reviewer's Country/Territory: India

Author's Country/Territory: Taiwan

Manuscript submission date: 2021-12-10

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Reviewer accepted review: 2021-12-26 05:46

Reviewer performed review: 2021-12-31 13:46

Review time: 5 Days and 7 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
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SPECIFIC COMMENTS TO AUTHORS

I would like to congratulate the authors for their sincere efforts to simplify the one of the most complicated and ignored topic. Treatment part is not discussed adequately in the review. I have some suggestions, the inclusion of which will results in the completeness of the topic. First, needs to discuss about Psoriatic arthritis and its effects on liver. Secondly, in systemic autoimmune diseases, use of herbs or ayurvedic medication are common, which often results in DILI, apart from NSAIDs, or DMARDs. Moreover, a mentioning should be there that a low dose methotrexate is safe , and we should not just make methotrexate culprit, without ruling out the other causes or co existent metabolic effects of uncontrolled systemic autoimmune diseases , can results in liver dysfunction, and therefore adequate control of systemic autoimmune diseases is required. Thirdly, a table should be dedicated to the treatment aspect, regarding the safety of commonly used DMARDs and biological agents in liver diseases, including psoriatic arthritis. My suggestions to include theses to change the clinical practice and remove the fear of using DMARDs in liver dysfunctions and precautions to be followed.



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Reviewer's Country/Territory: China

Author's Country/Territory: Taiwan

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Review time: 8 Days and 3 Hours

Scientific quality	<input checked="" type="checkbox"/> Grade A: Excellent [] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	<input checked="" type="checkbox"/> Grade A: Priority publishing [] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) [] Minor revision [] Major revision [] Rejection
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SPECIFIC COMMENTS TO AUTHORS

1. The topic of this review is interesting and the manuscript covers a wealth of information on coexisting AILDs in different SRDs and the therapeutic approach in managing these overlap diseases. 2. The structure of this review is designed properly and the manuscript is organized and presently well. The readers may feel better if the length of introduction can be shortened. 3. Distinguishing liver involvement in SRD from AILD and identifying the overlap of AILD and SRD is important at an early stage since such a coexistence may influence the disease course and prognosis. The data about the prevalence and characteristics about SLE-AIH overlap diseases have been listed in detail. It would be better if there is more detailed description on how to distinguish them and their characteristics in other overlap diseases.