

## ANSWERING REVIEWERS



March 31, 2014

Dear Editor,

We are writing you to resubmit our paper. After receiving the reviewer's and your comment we did revise the paper. After revising we did submit the paper for English language revision to AmEditors. Please find enclosed the edited manuscript in Word format.

**Title:** Eligibility of persons who inject drugs for treatment of HCV infection

**Author:** Arain Amber, Robaeys Geert

**Name of Journal:** *World Journal of Gastroenterology*

**ESPS Manuscript NO:** 7471

The manuscript has been improved according to the suggestions of reviewers:

[1 Format has been updated](#)

[2 Revision has been made according to the suggestions of the reviewer](#)

(1) Reviewer No. 01566894:

Two minor suggestions: 1) on page 2, "bulck" should be changed to "bulk". 2) on page 6, reference should be added to Dimova et al.

- Following both suggestions, the text is corrected.

(2) Reviewer No. 01809232

This is a timely and comprehensive review on antiviral therapy for HCV-infected "persons who inject drugs" (PWID). The article covers the relevant literature and provides eloquent arguments on why this group of HCV-infected patients should receive treatment. The authors discuss data on the impact of conventional anti-HCV regimens consisting of interferons and ribavirin on PWID. In addition, they integrate in their discussion the changing landscape with the novel direct antiviral agents, which are gradually becoming standard of care, even though data on PWID are still missing. Finally, they discuss issues that are specific to the management of substance users (such as psychological and social support etc). The manuscript is well-written and only requires correction of a few typos and errors (for instance a sentence is repeated twice towards the end of page 9). Since the article contains some financial data on the cost of conventional and novel anti-HCV therapies, I would suggest to include a comment on the impact of the additional support required for PWID (psychological, social etc) on the overall cost of their treatment.

- The typos and errors are corrected and the manuscript is edited by AmEditor (English language editing company).
- In the original submitted manuscript few sentences about cost effectiveness were written. During the revision these sentences are removed and the data about cost effectiveness is described in a separate paragraph

(3) Reviewer No. 02462252

Useful paper that will be of interest to the readership

(4) Reviewer No. 01807962

This review by Arain and Robaeys focuses on treatment of hepatitis C virus (HCV) infection in persons who inject drugs. This is an interesting topic that merits to be reviewed in the World Journal of Gastroenterology. However, the current manuscript lacks a clear outline and structure and requires major language revision.

- The structure and outline is adapted

Indeed, the English language and grammar/punctuation is poor.

- To improve English language, grammar, punctuation, the manuscript is revised by the company: AmEditor (English language editing company).

Altogether the readability of the manuscript and its overall quality are low. The readability of the review must be improved by revising the manuscript at least by taking into account the issues indicated below. In the reviewer's opinion, a review article should give a global overview of a defined topic. However, this manuscript is not an objective review of the literature but heavily reflects the author's opinion.

- During the revision we stressed topics that were recently described by the authors of this manuscript (Robaeys G, et al. Recommendations for the management of hepatitis C virus infection among people who inject drugs. *Clin Infect Dis*. 2013; **57** (Suppl 2): S129-37 [PMID: 23884061 DOI: 10.1093/cid/cit302]) and topics additional to these recent guidelines.

The authors should better balance each issue they address. There are several discrepant statement, e. g. about PWID-adherence to treatment (see page 7 (first paragraph) vs page 12 (bottom paragraph)). Different subchapters appear to deal with similar topics - better structure the review/content and summarize ideas instead of reviewing the literature in detail.

- According to the reviewer different chapters were dealing similar topics. To improve this, we did change the structure and content.

Title: modify the title to avoid starting with "Also". Rather think of "Eligibility of persons who inject drugs for treatment of HCV infection" or "Treatment of HCV infections in persons who inject drugs", ... ?

- The title has been changed into: "Eligibility of persons who inject drugs for treatment of HCV infection"

Section titles: they should be pertinent and reflect the content of the chapters. Increasing their readability will help to better structure the review. The majority of current subtitles is not relevant and should be modified. (Non exhaustive) Examples include: "Impact on general health": impact of what? "Evolution": of what? "Detection": of what? "Prevention": of what? "Do not postpone therapy": ? "Reinfection after successful HCV treatment": just this part of the sentence is in bold - but it is not a subheading.

- The section titles are also modified following the suggestions of the reviewer.

"Further achievable improvements for the future have been summarized by Bruggmann et al.": this is not a subtitle but a normal sentence

- The content and structure of this paragraph is corrected during the revision.

"Future": Future directions? Subchapters are of very different length. There are two extremes: "HCV in general - burden": this chapter is very short. Either include in introduction or another subchapter or develop this subchapter further. "Barriers for HCV antiviral management": is approx. 8 pages long (approx 1/3 of the entire text).

- The reviewer commented that subchapters are of very different length. We did improve this. Still one paragraph: "Strategies and treatment models to improve HCV care" is longer than other subchapters. The reason here fore is that there are many strategies and models to be described. So to give a clear picture we had to make this subchapter longer than the other subchapters.

?Abbreviations: define abbreviation when first used and then use it consistently throughout the text (please pay attention to IFN-alpha vs IFN-? vs Ifn, as well as SVR, DOT, RBV, ...) ?

- We did correct the use of abbreviations.

Punctuation/grammar/style: the manuscript would very much benefit from revision through a native English speaker. Moreover, in order to avoid different writing styles from different authors within the review, the writing style(s) should be homogenized. ?

- The writing style is homogenized

Page 9, second paragraph: PWID instead of PWUD?

- PWUD is replaced by PWID

?Page 18: to date no vaccine to prevent HCV infection is available! Please modify the text section at the bottom of the page accordingly.

- The content of the subchapter about prevention was changed so there was no need to modify the text as suggested by the reviewer.

### 3 References and typesetting were corrected

- On page 5 after the first sentence of subchapter "Treatment of PWID", there is referred to a series of more than 5 references. In our view all these articles are relevant. It was difficult for us to delete some references here. We would suggest referring to them all. Do you agree referring to all those references? Your suggestions are welcome.

Thank you again for considering to publish our manuscript in the *World Journal of Gastroenterology*.

Sincerely yours,

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