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PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

Manuscript NO: 78062

Title: Metabolic-associated fatty liver disease is associated with low muscle mass and

strength in patients with chronic hepatitis B

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03805961 Position: Peer Reviewer Academic degree: MD

Professional title: Assistant Professor, Instructor, Lecturer

Reviewer's Country/Territory: Thailand

Author's Country/Territory: Brazil

Manuscript submission date: 2022-06-05

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-06-06 05:03

Reviewer performed review: 2022-06-06 06:13

Review time: 1 Hour

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish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



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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

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

SPECIFIC COMMENTS TO AUTHORS

Thank you for inviting me to review this interesting work. The extensive and exhaustive evaluation of lifestyle, metabolic, and body composition work up are appreciated. Nonetheless, I have some comments as follow: 1. The introduction part is somewhat lengthy, I suggest to wrap it up or rewrite it into no longer than 3-4 paragraphs. 2. In the methodology section, 2.1 it is not clear whether all patients underwent USG and liver biopsy, or just some 2.2 what is the time difference between USG, liver biopsy, laboratory evaluation, and DXA, as well as the interview? As hepatic steatosis might change overtime according to lifestyle intervention, providing the time frame between the DXA and USG/liver biopsy test is important. 3. the definition of MAFLD no longer exclude alcohol drinking, why do you have to exclude 3 patients from the analysis?



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strength in patients with chronic hepatitis B

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03646974 Position: Peer Reviewer Academic degree: MD, PhD

Professional title: Chief Doctor, Chief Physician

Reviewer's Country/Territory: China

Author's Country/Territory: Brazil

Manuscript submission date: 2022-06-05

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-06-05 22:13

Reviewer performed review: 2022-06-08 13:09

Review time: 2 Days and 14 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] 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	[]Yes [Y]No



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Peer-reviewer statements

Peer-Review: [Y] Anonymous [] Onymous

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

SPECIFIC COMMENTS TO AUTHORS

In general, patients with decompensated cirrhosis often have low muscle mass. Therefore, I read this manuscript with novelty. Using statistical research methods, this manuscript has brought me some new insights, although this finding needs to be further confirmed by mechanistic studies. According to the way of thinking of clinicians, I think that in this study the number of patients with cirrhosis included is small, and patients with decompensated cirrhosis are not included. I look forward to a study comparing the low muscle mass of three groups of patients, namely CHB patients, compensated cirrhosis patients, and decompensated cirrhosis patients.