

# PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 81240

**Title:** Type 2 diabetes mellitus characteristics affect hepatocellular carcinoma development in chronic hepatitis B patients with cirrhosis

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 02731847

**Position:** Editorial Board

Academic degree: MD, MSc

Professional title: Associate Professor, Staff Physician

Reviewer's Country/Territory: Brazil

Author's Country/Territory: China

Manuscript submission date: 2022-10-31

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-10-31 17:17

Reviewer performed review: 2022-11-02 14:55

Review time: 1 Day and 21 Hours

	[ ] Grade A: Excellent [Y] Grade B: Very good [ ] Grade C:
Scientific quality	Good
	[ ] Grade D: Fair [ ] Grade E: Do not publish
Novelty of this manuscript	[ ] Grade A: Excellent [ ] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No novelty
Creativity or innovation of this manuscript	[ ] Grade A: Excellent[ ] Grade B: Good[ ] Grade C: Fair[ ] Grade D: No creativity or innovation



Scientific significance of the conclusion in this manuscript	[ ] Grade A: Excellent [ ] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No scientific significance
Language quality	[ ] Grade A: Priority publishing [ ] Grade B: Minor language polishing [Y] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	<ul> <li>[ ] Accept (High priority) [Y] Accept (General priority)</li> <li>[ ] Minor revision [ ] Major revision [ ] Rejection</li> </ul>
Re-review	[Y]Yes []No
Peer-reviewer statements	Peer-Review: [Y] Anonymous       [] Onymous         Conflicts-of-Interest: [] Yes       [Y] No

### SPECIFIC COMMENTS TO AUTHORS

This is a very interesting paper. Nevertheless, this is a already highly discussed subject, and it adds little novelty to the literture. Methods are well done, and it is nicely written. I would suggest publication after a good language review - this is the major let down of this paper.



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Peer-review model: Single blind

**Reviewer's code:** 03261931

**Position:** Associate Editor

Academic degree: MD, PhD

Professional title: Director, Professor

Reviewer's Country/Territory: Taiwan

Author's Country/Territory: China

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Review time: 2 Days and 3 Hours

	[ ] Grade A: Excellent [Y] Grade B: Very good [ ] Grade C:
Scientific quality	Good
	[ ] Grade D: Fair [ ] Grade E: Do not publish
Novelty of this manuscript	[ ] Grade A: Excellent [ ] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No novelty
Creativity or innovation of	[ ] Grade A: Excellent [ ] Grade B: Good [ ] Grade C: Fair
this manuscript	[ ] Grade D: No creativity or innovation



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#### SPECIFIC COMMENTS TO AUTHORS

Li et al. enrolled 412 CHB patients, including 196 patients with DM and the other 216 non-DM patients to assess the effect of DM on the risk of HCC. They found that DM, male, alcohol abuse, AFP >20 ng/mL and HBsAg >2.0 log IU/mL were risk factors for HCC development. DM duration of more than 5 years, diet control and insulin ± sulphonylurea therapy significantly increased the risk of hepatocarcinogenesis. They concluded that DM greatly impacts the outcome of HBV. Several issues need to be addressed. Comments: 1. Were all the patients cirrhotic, as described in the materials and methods? If yes, please clarify it throughout the manuscript from title to conclusion. 2. How about the HbA1C levels of DM patients? The well vs. poor control of DM might have impacts on the HCC risk. 3. Did any DM patients receive metformin? A recent large-scale study showed that metformin use greatly reduced the risk of HCC after al. development HCV eradication [Tsai et I Hepatol. 2022 Oct 5:S0168-8278(22)03129-4. doi: 10.1016/j.jhep.2022.09.019. Epub ahead of print. PMID: 36208843.]. Please discuss it. 4. A recent study showed rGT levels were associated with risk of HCC among HBV patients on NUC therapy [Huang CF, et al. Liver Int. 2022



Jan;42(1):59-68.]. The authors reported the baseline rGT levels among the HBV patients, but did not take it into analysis for HCC risk. Please analyze and discuss it. 5. The preparation of NUC (TDF vs ETV) for HBV therapy might have different risks of HCC. How about the NUC used in this study? 6. DM is highly associated with fatty liver. However, fatty liver was significantly associated with lower cirrhosis and HCC risk in a previous study [Li J, et al. J Infect Dis. 2021 Jul 15;224(2):294-302.]. How about the data in this study? Please discuss it