

## PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

Manuscript NO: 70797

**Title:** Revolution in the diagnosis and management of hepatitis C virus infection in current era.

Provenance and peer review: Invited manuscript; externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05573855

**Position:** Editorial Board

Academic degree: MD, PharmD, PhD

**Professional title:** Professor

Reviewer's Country/Territory: China

Author's Country/Territory: Pakistan

Manuscript submission date: 2021-08-15

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-09-05 10:41

Reviewer performed review: 2021-09-14 08:40

Review time: 8 Days and 21 Hours

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish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



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

### SPECIFIC COMMENTS TO AUTHORS

1. This review focuses on the major advances in the diagnosis and treatment of chronic hepatitis C virus infection in recent years. However, the overview is not complete, and some safety therapies are not outlined in it. For example, the combination of traditional medicine and modern medicine therapy. 2. The authors need to provide more compelling evidence if they wish to retain this conclusion in the manuscript - otherwise, the model (Fig. 3) should be redrawn.



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Provenance and peer review: Invited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

Reviewer's code: 05238433

Position: Peer Reviewer

Academic degree: PhD

Professional title: N/A, Senior Scientist

Reviewer's Country/Territory: India

Author's Country/Territory: Pakistan

Manuscript submission date: 2021-08-15

Reviewer chosen by: Xin Liu (Online Science Editor)

Reviewer accepted review: 2021-11-29 17:43

Reviewer performed review: 2021-12-07 16:07

Review time: 7 Days and 22 Hours

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish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



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

## SPECIFIC COMMENTS TO AUTHORS

I have reviewed the review article entitled " Revolution in the diagnosis and management of HCV infection in current era" submitted by FM Hanif, et al. The review article title has been mentioned to discussed about the diagnosis and treatment, however the article discussed about the therapy available for the HCV not about the diagnosis part.



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Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05267231

**Position:** Editorial Board

Academic degree: MD, PhD

Professional title: Chief Physician

Reviewer's Country/Territory: Greece

Author's Country/Territory: Pakistan

Manuscript submission date: 2021-08-15

Reviewer chosen by: Xin Liu (Online Science Editor)

Reviewer accepted review: 2021-11-30 04:21

Reviewer performed review: 2021-12-08 17:58

Review time: 8 Days and 13 Hours

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



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

#### SPECIFIC COMMENTS TO AUTHORS

Well-organized manuscript about the diagnosis and management of chronic hepatitis C. The abstract is clear. The English language is unequivocal. References are up-to-date. The manuscript summarizes HCV treatment among the general population and "difficult to treat" patients such as those with CKD. It also provides additional data about HCV/HBV co-infection and transplantation. The authors also comment about the HCV eradication program. Major concerns No data is presented about people who inject drugs (PWID) and MSM. Yet, they represent the vast majority of HCV-infected patients. In addition, most eradication programs are towards effective treatment among PWIDs. Therefore, a paragraph about HCV treatment in PWIDs should be added. Minor concerns Introduction, "....more than 6 months causes liver cirrhosis and/or hepatocellular carcinoma". However, this information is inaccurate since the mean time to cirrhosis is about 30 years. Renal involvement in chronic HCV infection, "...with nucleic acid amplification tests (NAT) is recommended". However, this recommendation is not entirely accepted. HCV RNA detection among anti-HCV-negative haemodialysis patients seems to be zero in a recent study. (Ref: HCV viraemia in anti-HCV-negative haemodialysis patients: Do we need HCV RNA detection test? Int J Artif Organs 2018;41:168-170).



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Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06139511

Position: Peer Reviewer

Academic degree: PhD

Professional title: Assistant Professor

Reviewer's Country/Territory: India

Author's Country/Territory: Pakistan

Manuscript submission date: 2021-08-15

Reviewer chosen by: Xin Liu (Online Science Editor)

Reviewer accepted review: 2021-11-30 00:56

Reviewer performed review: 2021-12-09 09:45

Review time: 9 Days and 8 Hours

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



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

### SPECIFIC COMMENTS TO AUTHORS

The review article entitled "Revolution in the diagnosis and management of chronic HCV infection in current era" is a comprehensive review on the latest trends in HCV treatment. The manuscript has been divided into adequate subsections that deals with different aspects of HCV treatment such as DAAs, treatment with respect to HCC, HBV co-infection etc. The manuscript however can be improved by: Inclusion of a couple of tables that summarises the different clinical trials, their main targets and major achievements. A table on list of abbreviations would also be helpful.



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Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05334153

Position: Peer Reviewer

Academic degree: MD

Professional title: Assistant Professor

Reviewer's Country/Territory: Egypt

Author's Country/Territory: Pakistan

Manuscript submission date: 2021-08-15

Reviewer chosen by: Xin Liu (Online Science Editor)

Reviewer accepted review: 2021-11-29 14:22

Reviewer performed review: 2021-12-12 08:42

Review time: 12 Days and 18 Hours

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



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

#### SPECIFIC COMMENTS TO AUTHORS

Specific comments to authors: Hanif and co-others in this review article report on "Revolution in the diagnosis and management of chronic HCV infection in current era". The manuscript is properly written, and of clinical interest although the authors need to address some points as follows. - The manuscript needs to be more focused on the subject of the title, which is the "Revolution in HCV diagnosis and treatment". Too many historical parts made the manuscript very lengthy. - The authors have made enormous efforts in presenting the results of different studies through out the article but that, in my opinion, lead to mentioning too many numbers and distractions. It needs to be more focused and concise. In every subtitle try to mention the final conclusion of several studies under one idea and then refer to as much as references as needed. But not to mention the details of every study separately. - At the beginning I prefer if you can mention briefly the classification and mechanism of action of different DAAs. You may need to add a figure. - Regarding patients post liver and post renal transplantation, please add the proper timing to start DAAs after transplantation. - The manuscript lacks the effect of DAAs in some of special groups most importantly "children". Other special groups include patients with malignancies (whether treated or under treatment), chronically transfused patients (as Thalassemia), HCV relapsers and HCV re-infected patients. - In patients with ESRD on hemodialysis, you mentioned that there is poor excretion of DAAs. Is there any increased cardiovascular risk in those patients, knowing the arrhythmogenic effect of DAAs? - You need to add the several risks of using DAAs especially the cardiac ones. - You mentioned the big cost of these new DAAs especially in low-income countries and in uninsured patients. Please mention the efforts made in



some low/middle income countries like Egypt to subsidize the prices of DAAs. Taking into consideration that Egypt is one of the biggest pools for HCV in the world. - I could not find any publication in your manuscript from Egypt!! Again it is the most prevalent country in HCV infection in the world and the biggest pool for HCV genotype 4. Thanks



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**Peer-review model:** Single blind

Reviewer's code: 05606976

**Position:** Peer Reviewer

Academic degree: BSc, MD, PhD

Professional title: Doctor, Research Scientist

Reviewer's Country/Territory: Italy

Author's Country/Territory: Pakistan

Manuscript submission date: 2021-08-15

Reviewer chosen by: Xin Liu (Online Science Editor)

Reviewer accepted review: 2021-11-29 14:28

Reviewer performed review: 2021-12-14 08:04

Review time: 14 Days and 17 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 [ ] Grade B: Minor language polishing [ Y] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	<ul> <li>[ ] Accept (High priority) [ ] Accept (General priority)</li> <li>[ ] Minor revision [ Y] Major revision [ ] Rejection</li> </ul>
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Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous
statements	Conflicts-of-Interest: [ ] Yes [Y] No

### SPECIFIC COMMENTS TO AUTHORS

Major points The review is not well organized and do not fully covers the different subjects. The suggestion is to rewrite and ask for English Proofreading: the "non native speakers certificate" is from an academic professor, please provide a complete revision professional international scientific service for the current flaws in the manuscript. Minor points Modify in the introduction " Hepatitis B virus (HBV) and Hepatitis C virus (HCV) account for 90% of viral hepatitis-related mortality per annum" The review is not on general hepatitis,