

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Hepatology

**Manuscript NO:** 67866

**Title:** Prevalence and risk factors of steatosis and advanced fibrosis using transient elastography in the United States' adolescent population

**Reviewer's code:** 03612998

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

**Reviewer's Country/Territory:** Italy

**Author's Country/Territory:** United States

**Manuscript submission date:** 2021-05-04

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-05-04 17:10

**Reviewer performed review:** 2021-05-04 17:34

**Review time:** 1 Hour

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 Grade E: Do not publish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

## **SPECIFIC COMMENTS TO AUTHORS**

The MS entitled "Prevalence and risk factors of steatosis and advanced fibrosis ...." deals with an interesting topic and is scientifically sound. Some points should be implemented before considering it ready for publication. 1- It has been previously. This important aspect has not been emphasized demonstrated that hypogonadism and low testosterone level is associated to an increased risk for NAFLD and NASH (Maseroli et al., J Endocrinol Invest. 2021 Apr;44(4):819-842. doi: 10.1007/s40618-020-01381-8. Epub 2020 Aug 8.) 2- Following this line, the authors should recognize that a limitation is the lack of an analysis of the association of NAFLD with the Tanner stages. 3- The authors should present data according to gender. 4- The authors reported that several cardio-metabolic risk factors were predictors of fibrosis stage. A multi-regression analysis should be performed to assess the most relevant one during adolescence. 5- It has been recently recognized that low SHBG level could predict the presence of NAFLD (Front Endocrinol (Lausanne). 2021 Mar 29;12:641446. doi: 10.3389/fendo.2021.641446. eCollection 2021.) in particular a SHBG level below 33-4 nM is considered to predict the presence of NAFLD. This biochemical marker of NAFLD should be commented and briefly discussed. 6- Are there any hormonal data to evaluate the relationship between hepatic alterations and hormonal level?