

Answers to Reviewers

CLIF-SOFA and CLIF-C scores for the prognostication of Acute-on-Chronic Liver Failure and Acute Decompensation of Cirrhosis: Systematic Review

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Reviewer 1

Extensive data and research has been done in hepatology for evaluation of different prognostic scores. The CANONIC study brought a paradigm shift in understanding ACLF. Authors have reviewed the literature thoroughly and found that CLIF-SOFA score has been found to be best for prognostication of patients with ACLF.

Thank you for your kind words. We are glad to be able to submit our paper for appreciation.

Reviewer 2

Dear Reviewer, we are glad to have the opportunity to improve our manuscript.

ABSTRACT: CLIF-SOFA does not distinguish AD from ACLF. It does detect de presence of ACLF in patients with or without AD, and classifies the ACLF into three grades.

We have corrected the sentence.

Core tip: Conclusion is different from abstract conclusion, and from the article conclusion. ACLF includes liver failure in its nomenclature.

We have corrected the sentence.

Discussion: The objectives of the study should be on the end of introduction, before Methods.

We have corrected the position of the sentence.

Conclusion: The aim of the study should match the conclusion.

We have corrected the sentence.

The first table is very interesting, though it thus not have a number or a title. Tables 1 and 2 are not necessary and should be removed. The study is on CLIF-SOFA.

We have corrected the mistake in the first table, naming it Table 5. We believe that Table 1 and 2 are necessary, as we compare CLIF-SOFA with these scores throughout the text.

Reviewer 3

Dear Reviewer, we are glad to have the opportunity to improve our manuscript.

The title partly reflects the main subject of the manuscript.

We have corrected this.

The abstract and key words summarize and reflect the work described in the manuscript.

Thank you.

The background describes the significance of the study. The methodology is scientific. The conclusion has certain guiding significance for clinical practice.

Thank you.

The discussion part is sufficient, but the results and conclusions of this study are not discussed in depth.

The discussion in our paper is quite long, and discusses the results described in Table 5, comparing the EASL-CLIF scores with other scores.

The illustrations and tables reflect the content of the articles, while the table which showed 50 included articles lacks title and note.

We have corrected this.

The references cite recent literature, but the format should be unified. The language grammar is accurate and appropriate.

We have corrected this.

This article is a systematic review, and the PRISMA 2009 listing has been provided.

Thank you.

The manuscript discusses in various scoring systems in ACLF prognosis assessment, draw a CLIF-SOFA score in predicting the short-term prognosis of patients with ACLF are superior to other models. CLIF-SOFA and CLIF-C scores could accurately predict the short-term and long-term mortality of patients with ACLF, which might guide the selection and application of prognostic evaluation model for patients with ACLF.

Thank you.

This study has some limitations: The title of this study is “CLIF-SOFA and CLIF-C scores for the prognostication of Acute-on-Chronic Liver Failure”, while many research objects are not patients with ACLF. The CLIF-C AD score shouldn’t be used for prognostication evaluation of patients with ACLF. The article does not clearly distinguish AD from ACLF.

We agree, and we have made this clear in the manuscript.

"These results indicate that liver failure is not necessary for the diagnosis of ACLF when distinguishing ACLF" is mentioned in “Core tip”, while the basis is not found throughout the paper, please explain in detail.

This sentence was wrong, we have corrected it.