

PEER-REVIEW REPORT

Name of journal: *World Journal of Hepatology*

Manuscript NO: 87082

Title: Risk of hepatitis B reactivation in patients with myeloproliferative neoplasms treated with ruxolitinib: a review

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06195974

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Assistant Professor

Reviewer's Country/Territory: United States

Author's Country/Territory: Romania

Manuscript submission date: 2023-07-23

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-08-01 21:36

Reviewer performed review: 2023-08-01 21:46

Review time: 1 Hour

Scientific quality	<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 Grade E: Do not publish
Novelty of this manuscript	<input checked="" type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input checked="" type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation
Scientific significance of the conclusion in this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
Language quality	<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

Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority)
	<input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	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

In this minireview, the authors provided overview the association between ruxolitinib treatment in MPNs and hepatitis B reactivation. After a literature review, they concluded that ruxolitinib's interaction with the immune system can increase the susceptibility to opportunistic infections, highlighting the need for careful monitoring and timely intervention and there is a potential for HBVr, especially in patients with a history of HBV infection. Close monitoring of liver function and proactive measures, such as prophylactic antiviral therapy, are crucial to manage these risks. Thus, ruxolitinib offers therapeutic benefits for MPNs, but a careful evaluation of infection risk, regular monitoring, and appropriate interventions are essential to ensure patient safety. The review is of interest.

I have only a comment that in my opinion could improve the clinical significance of this manuscript. The authors should recall the importance of other co-factors in natural history of HBV infection. In particular, the role of alcohol intake should be recalled and discussed since it was previously demonstrated that alcohol intake is an independent risk factor for cirrhosis and hepatocellular carcinoma development inn HBV patients as previously demonstrated (Natural course of chronic HCV and HBV infection and role of alcohol in the general population: the Dionysos Study. Am J Gastroenterol. 2008 Sep;103(9):2248-53.).

RESPONSE: Thank you for the positive feedback regarding our manuscript. We have mentioned the contributing role of alcohol to the development of cirrhosis and HCC as instructed and cited the indicated reference.

Dear Dr. Gaman,

We are pleased to inform you that, after preview by the Editorial Office and peer review as well as CrossCheck and Google plagiarism detection, we believe that the academic quality, language quality, and ethics of your manuscript (Manuscript NO.: 87082, Minireviews) basically meet the publishing requirements of the *World Journal of Hepatology*. As such, we have made the preliminary decision that it is acceptable for publication after your appropriate revision.

Upon our receipt of your revised manuscript, we will send it for re-review. We will then make a final decision on whether to accept the manuscript or not, based upon the reviewers' comments, the quality of the revised manuscript, and the relevant documents.

Please follow the steps outlined below to revise your manuscript to meet the requirements for final acceptance and publication.

1 MANUSCRIPT REVISION DEADLINE

We request that you submit your revision in no more than **14 days**. **Please note that you have only two chances for revising the manuscript.**

2 PLEASE SELECT TO REVISE THIS MANUSCRIPT OR NOT

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Please resolve all issues in the manuscript based on the peer review report and make a point-by-point response to each of the issues raised in the peer review report, and **highlighted the revised/added contents with yellow color in the revised manuscript**. Note, authors must resolve all issues in the manuscript that are raised in the peer-review report(s) and provide point-by-point responses to each of the issues raised in the peer-review report(s); these are listed below for your convenience:

Reviewer #1:

Scientific Quality: Grade B (Very good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Specific Comments to Authors: In this minireview, the authors provided overview the association between ruxolitinib treatment in MPNs and hepatitis B reactivation. After a

literature review, they concluded that ruxolitinib's interaction with the immune system can increase the susceptibility to opportunistic infections, highlighting the need for careful monitoring and timely intervention and there is a potential for HBVr, especially in patients with a history of HBV infection. Close monitoring of liver function and proactive measures, such as prophylactic antiviral therapy, are crucial to manage these risks. Thus, ruxolitinib offers therapeutic benefits for MPNs, but a careful evaluation of infection risk, regular monitoring, and appropriate interventions are essential to ensure patient safety. The review is of interest. I have only a comment that in my opinion could improve the clinical significance of this manuscript. The authors should recall the importance of other co-factors in natural history of HBV infection. In particular, the role of alcohol intake should be recalled and discussed since it was previously demonstrated that alcohol intake is an independent risk factor for cirrhosis and hepatocellular carcinoma development in HBV patients as previously demonstrated (Natural course of chronic HCV and HBV infection and role of alcohol in the general population: the Dionysos Study. *Am J Gastroenterol.* 2008 Sep;103(9):2248-53.).

RESPONSE: Thank you for the positive feedback regarding our manuscript. We have mentioned the contributing role of alcohol to the development of cirrhosis and HCC as instructed and cited the indicated reference.

4 LANGUAGE POLISHING REQUIREMENTS FOR REVISED MANUSCRIPTS SUBMITTED BY AUTHORS WHO ARE NON-NATIVE SPEAKERS OF ENGLISH

As the revision process results in changes to the content of the manuscript, language problems may exist in the revised manuscript. Thus, it is necessary to perform further language polishing that will ensure all grammatical, syntactical, formatting and other related errors be resolved, so that the revised manuscript will meet the publication requirement (Grade A).

Authors are requested to send their revised manuscript to a professional English language editing company or a native English-speaking expert to polish the manuscript further. When the authors submit the subsequent polished manuscript to us, they must provide a new language certificate along with the manuscript.

Once this step is completed, the manuscript will be quickly accepted and published online. Please visit the following website for the professional English language editing companies we recommend: <https://www.wjgnet.com/bpg/gerinfo/240>.

5 ABBREVIATIONS

In general, do not use non-standard abbreviations, unless they appear at least two times in the text preceding the first usage/definition. Certain commonly used abbreviations, such as DNA, RNA, HIV, LD50, PCR, HBV, ECG, WBC, RBC, CT, ESR, CSF, IgG, ELISA, PBS, ATP, EDTA, and mAb, do not need to be defined and can be used directly.

The basic rules on abbreviations are provided here:

- (1) **Title:** Abbreviations are not permitted. Please spell out any abbreviation in the title.
- (2) **Running title:** Abbreviations are permitted. Also, please shorten the running title to no more than 6 words.
- (3) **Abstract:** Abbreviations must be defined upon first appearance in the Abstract. Example 1: Hepatocellular carcinoma (HCC). Example 2: *Helicobacter pylori* (*H. pylori*).
- (4) **Key Words:** Abbreviations must be defined upon first appearance in the Key Words.
- (5) **Core Tip:** Abbreviations must be defined upon first appearance in the Core Tip. Example 1: Hepatocellular carcinoma (HCC). Example 2: *Helicobacter pylori* (*H. pylori*)
- (6) **Main Text:** Abbreviations must be defined upon first appearance in the Main Text. Example 1: Hepatocellular carcinoma (HCC). Example 2: *Helicobacter pylori* (*H. pylori*)
- (7) **Article Highlights:** Abbreviations must be defined upon first appearance in the Article Highlights. Example 1: Hepatocellular carcinoma (HCC).

Example 2: *Helicobacter pylori* (*H. pylori*)

(8) **Figures:** Abbreviations are not allowed in the Figure title. For the Figure Legend text, abbreviations are allowed but must be defined upon first appearance in the text. Example 1: A: Hepatocellular carcinoma (HCC) biopsy sample; B: HCC-adjacent tissue sample. For any abbreviation that appears in the Figure itself but is not included in the Figure Legend textual description, it will be defined (separated by semicolons) at the end of the figure legend. Example 2: BMI: Body mass index; US: Ultrasound.

(9) **Tables:** Abbreviations are not allowed in the Table title. For the Table itself, please verify all abbreviations used in tables are defined (separated by semicolons) directly underneath the table. Example 1: BMI: Body mass index; US: Ultrasound.

6 EDITORIAL OFFICE'S COMMENTS

Authors must revise the manuscript according to the Editorial Office's comments and suggestions, which are listed below:

(1) *Science editor:*

The manuscript has been peer-reviewed, and it is ready for the first decision.

(2) *Company editor-in-chief:*

I have reviewed the Peer-Review Report and the full text of the manuscript, all of which have met the basic publishing requirements of the World Journal of Hepatology, and the manuscript is conditionally accepted. I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report, Editorial Office's comments and the Criteria for Manuscript Revision by Authors. The quality of the English language of the

manuscript does not meet the requirements of the journal. Before final acceptance, the author(s) must provide the English Language Certificate issued by a professional English language editing company. Please visit the following website for the professional English language editing companies we recommend: <https://www.wjgnet.com/bpg/gerinfo/240>. Before final acceptance, when revising the manuscript, the author must supplement and improve the highlights of the latest cutting-edge research results, thereby further improving the content of the manuscript. To this end, authors are advised to apply a new tool, the Reference Citation Analysis (RCA). RCA is an artificial intelligence technology-based open multidisciplinary citation analysis database. In it, upon obtaining search results from the keywords entered by the author, "Impact Index Per Article" under "Ranked by" should be selected to find the latest highlight articles, which can then be used to further improve an article under preparation/peer-review/revision. Please visit our RCA database for more information at: <https://www.referencecitationanalysis.com/>. Uniform presentation should be used for figures showing the same or similar contents; for example, "Figure 1 Pathological changes of atrophic gastritis after treatment. A: ...; B: ...; C: ...; D: ...; E: ...; F: ...; G: ...". Please provide decomposable Figures (in which all components are movable and editable), organize them into a single PowerPoint file. Please check and confirm whether the figures are original (i.e. generated de novo by the author(s) for this paper). If the picture is 'original', the author needs to add the following copyright information to the bottom right-hand side of the picture in PowerPoint (PPT): Copyright ©The Author(s) 2023.

RESPONSE: Thank you for the positive feedback regarding our manuscript. The paper was edited by a native speaker of English listed among the authors.

7 STEPS FOR SUBMITTING THE REVISED MANUSCRIPT

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Please click and download the [Format for authorship, institution, and corresponding author guidelines](#), and further check if the authors names and institutions meet the requirements of the journal.

Step 2: Manuscript Information

Please check if the manuscript information is correct.

Step 3: Abstract, Main Text, and Acknowledgements

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Step 5: Footnotes and Figure Legends

(1) Requirements for Figures: Please provide decomposable Figures (in which all components are movable and editable), organize them into a single PowerPoint file, and submit as “87082-Figures.pptx” on the system. The figures should be uploaded to the file destination of “Image File”. Please check and confirm whether the figures are original (i.e. generated de novo by the author(s) for this paper). If the picture is ‘original’, the author needs to add the following copyright information to the bottom right-hand side of the picture in PowerPoint (PPT): Copyright ©The Author(s). Please click to download the sample document: [Download](#).

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Reminder: Please click and download the [Guidelines for preparation of bitmaps, vector graphics, and tables in revised manuscripts \(PDF\)](#), and prepare the figures and tables of your manuscript accordingly.

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Authors cannot replace and upload the “Manuscript File” separately. Since we only accept a manuscript file that is automatically generated, please download the “Full Text File” or click “Preview” to ensure all the contents of the manuscript automatically generated by the system are correct and meet the requirements of the journal. If you find that there is content that needs to be modified in the Full-Text File, please return to the corresponding step(s), modify and update the content, and save. At this point, you then

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- (4) 87082-Copyright License Agreement
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- (7) 87082-Video
- (8) 87082-Image File
- (9) 87082-Table File
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RESPONSE: All files have been provided.

For all manuscripts involving human studies and/or animal experiments, author(s) must submit the related formal ethics documents that were reviewed and approved by their local ethical review committee. This is mandatory and is one of the determining factors for whether or not the manuscript will be finally accepted. If human and animal studies received waiver of the approval requirement from the ethics committee, the author(s) must provide an official statement to this effect made by the ethics committee. The guidelines for manuscript type and related ethics and relevant documents/statements can be found at: <https://www.wjgnet.com/bpg/GerInfo/287>.

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Reminder: If any of the authors do not receive the email of CLA, please check the spam folder. If the author still can't find the email, please contact us via email at: submission@wjgnet.com.

RESPONSE: The CLA has been provided. However, we did not receive the link to sign it virtually by email.

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Please click and download the fillable [ICMJE Form for Disclosure of Potential Conflicts of Interest](#) (PDF), and fill it in. The Corresponding Author is responsible for filling out this form. Once filled out completely, the Conflict-of-Interest Disclosure Form should be uploaded to the file destination of 'Conflict-of-Interest Disclosure Form'.

RESPONSE: The ICMJE COI form has been provided.

Best regards,

Li Ma, Science Editor, Editorial Office Director, Company Editor-in-Chief, Editorial Office

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