

Responses to Reviewer Comments

April 20, 2015

Dear Editor,

Please find enclosed the edited manuscript in Word format (ESPS Manuscript NO: 17655).

Title: Transjugular Intrahepatic Portosystemic Stent Shunt for Medically Refractory Hepatic Hydrothorax: A Systematic Review and Cumulative Meta-Analysis

Authors: Ivo C Ditah, Badr F Al Bawardy, Behnam Saberi, Chobufo Ditah, Patrick S Kamath

Name of Journal: *World Journal of Hepatology*

ESPS Manuscript NO: 17655

The manuscript has been improved according to the suggestions of reviewers:

1 Format has been updated according to the journal recommended format

2 Revision has been made according to the suggestions of the reviewer:

Reviewer # 2451447

The authors evaluated the effectiveness of TIPSS in patients with RHH by pooling all available evidence in a systematic review with cumulative meta-analysis. This review paper is well written and scientifically solid. I would recommend the acceptance for publication.

We thank the reviewer for pointing out the relevance of this work on this rare but challenging complication of cirrhosis.

Reviewer # 51373

The manuscript is very well written. In my opinion, it should be published unaltered.

We thank the reviewer for pointing out the relevance of this work on this rare but challenging complication of cirrhosis.

Reviewer # 181536

This review article summarized the Transjugular Intrahepatic Portosystemic Stent Shunt (TIPSS) for refractory hepatic hydrothorax. The contents are interesting, however, there are some issues to add as follows.

Comments; 1. The content should be more precisely structured.

The article has been read in its entirety and edited as suggested by the reviewer to focus its content on the question we set out to address.

The discussion is somewhat insufficient to understand the TIPSS. The primary success rates with later maintaining success rates, and the precise explanation for the technical tips or complication with the method should be added.

We thank the reviewer for this comment. Information on the TIPSS procedure is provided in the last paragraph of the introduction.

Although the authors explained that the incidence of hepatic encephalopathy relies on the subjective diagnosis of hepatic encephalopathy, there must be some other factors in the patient background. More precise discussion should be added also for hepatic encephalopathy as a complication.

The working definition of TIPSS-related hepatic encephalopathy is provided under the methods section under subtitle “TIPSS-related complications”. The definition incorporates the patients’ background in terms of pre-existing encephalopathy prior to the TIPSS procedure. This outcome is further commented upon in the second to the last paragraph of the discussion section of the article.

2. In Results section, predictors of mortality was mentioned, however, the mortality after intervention on cirrhosis patients such as TIPSS relies on early procedure related mortality and post-TIPSS liver failure related mortality. The authors should add more information on mortality.

We agree with the reviewer that having more granular data on the reasons for post-TIPSS mortality would be of great clinical significance. Unfortunately, because detail information on the exact cause of deaths was not uniformly available from all the studies, a more refined analyses could not be carried out on this outcome. However, paragraph 3 of the discussion provides information where it was available on the causes of (early) death in patient’s post-TIPSS. This limitation is also noted in the last paragraph of the discussion and highlighted.

Minor comments 1. Introduction Line 11: “ascetic” should be “ascitic”.

We thank the reviewer for noticing this typo. It has been corrected as suggested.

3 References and typesetting were corrected

Thank you again for considering this manuscript for publication in the *World Journal of Hepatology*.

Sincerely yours,

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