

# ANSWERING REVIEWERS



September 22, 2015

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 18875-Revised manuscript.doc).

**Title:** Nutritional assessment in cirrhotic patients with hepatic encephalopathy

**Author:** Fernando Gomes Romeiro, Laís Augusti

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

**ESPS Manuscript NO:** 18875

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

**Reviewer 00051758:**

We thank the reviewer for his/her time correcting our work. Your comments were valuable in order to improve the original version, and now we are sending a point-by-point response to each of them:

- As commented by the reviewer and mentioned in the article, nutritional evaluation has many aspects that are widely accepted in patients with liver cirrhosis, but not all of them were adequately assessed in patients with hepatic encephalopathy (HE). Patients with this late complication of liver disease usually present different degrees of mental disturbances

and such changes in body compartments as ascites, edema and muscle wasting, which can impair some measures of nutritional assessment. This combination of mental and bodily changes precludes their inclusion in many clinical trials, contributing to the lack of scientific data on this population. These mental and body alterations can be worsened by nutritional deficiencies, leading to a vicious cycle involving inadequate nutritional support, HE symptoms, and metabolic consequences of the high catabolism induced by liver disease, aggravating the patient's illness. The aim of the paper is to support the concept that in many circumstances nutritional assessment can also be performed in this subpopulation of cirrhotic patients, obtaining valuable scientific information and promoting better treatments for them. This is an essential step for reducing muscular catabolism and HE progression, and is significant in highlighting the need for more data on patients in this condition, because they are the most affected when their nutritional status is not properly evaluated. Finally, there are many review articles about nutritional evaluation of patients with cirrhosis, but not for patients with cirrhosis and HE, who are probably the most affected by nutritional deficiencies. Taking all these considerations together, only the patients with both conditions were the purpose of this paper. In response to your suggestion, we have discussed some possibilities of changing the paper title, but we have not found another option because the whole article was written with the aim of obtaining a nutritional assessment of patients with cirrhosis and HE. Under a general title, the focus on this specific population would not be so evident, rendering the original title more adequate.

- We completely agree with the reviewer regarding the word "lethal" and the preposition before "hepatic coma". The corrections were highlighted on page 1.

- After the reviewer's comments we noticed that the topic about hyponatremia and other metabolic disturbances could be misunderstood; so it was corrected on page 6. Now the situations that could be observed in HE and other forms of encephalopathy are discussed under a more comprehensive topic.

**Response to the reviewer 02861217:**

We thank the reviewer for his/her time correcting our work. Your comments were important in order to improve the original version. As suggested by the reviewer, the inclusion of the algorithm increased the practical meaning of the article. This algorithm shows some suggestions about nutritional assessment methods that can be performed according to the limitations imposed by hepatic encephalopathy and the main characteristics of each method.

Thank you again for publishing our manuscript in the *World Journal of Hepatology*.

Sincerely yours,

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