

To:

Editorial Board of World Journal of Hepatology

RE: Manuscript ID: 22954

Title:

Hepatitis E Virus Infection in the Liver Transplant Recipients : Clinical Presentation and Management

We would like to express our appreciation to the reviewers and editor for spending time and effort to improve our manuscript. Your suggestions were valuable to help us strengthen our work.

Reviewer 1:

In the minireview, the authors described the epidemiology, presentation, SOT recipients, index of suspicion and the available diagnostic assays. Finally, the authors reviewed the treatments of HEV infection in patients with liver transplantation. The manuscript was well organized and written. There are several issues should be modified. First, there was no abstract which should be offered according to the journal's requirements. Second, tables are needed to describe visually. Third, the available diagnostic assays for HEV were limited and the comparisons between them were insufficient. Forth, IFN are the frequent-used abbreviation of interferon.

Response: 1. An abstract was added to the manuscript. 2. A table and a figure were added. The available diagnostic assays for HEV were further discussed. 4. Interferon is now abbreviated as IFN.

Reviewer 2:

This is mini review discusses on an interesting topic HEV in the Liver transplant recipients. First and foremost, this mini review has no tables or figures. This reviewer suggests to incorporate about the genotypes, the genotypes that exclusively infect humans and other animals (in the introduction part), the major causes that account for HVE infection after the organ transplantation in the "etiology section" and discuss the

major defect in HEV RNA diagnosis in terms of sensitivity and specificity (ie.

Response: We have added a table highlighting the points mentioned by the reviewer.

Diagnosis based on HEV RNA testing as antibody assays are not sensitive enough in transplanted patients) under the title “Available diagnostic assays”. Since progression of rapid fibrosis causing cirrhosis within 1-2 years of infection and graft failure is seen, the current recommendation of early diagnosis and preventive measures in immune compromised individuals like avoid eating uncooked meat and contact with possibly HEV-infected animals have to be highlighted. The following titles are missing in this article: 1) Abstract with key words 2) Core tip and 3) Conclusion. The references are not properly cited (as per the style) in the article and also in the reference list. The title of the review has to be modified effectively “Hepatitis E Virus Infection in the Liver transplant recipients: Clinical Presentation and Management” ?.

Response: 1. An abstract with key words was added. 2. A Core Tip was added. 3. A conclusion was added. 4. References were modified to the appropriate stylistic format in the manuscript and reference list. The title of the manuscript was modified as well based on the reviewer’s recommendation.

Reviewer 3:

This is a well written manuscript on the relevant subject. The authors provide information on hepatitis E in a very detailed and specific manner. For this reason, we suggest the authors to contextualize the issue in the introduction so that the reader may have a clearer and more comprehensive idea of hepatitis E, the clinical and epidemiological importance, the serological characteristics, and the more specific geographical distribution in both hemispheres.

Response: We agree with the reviewer’s summary of the manuscript.

Reviewer 4:

Agree to publish.

Response: We appreciate the reviewer's kind words.

Reviewer 5:

It is correct but not very original. It is descriptive but nothing innovative.

Reviewer 6:

The authors reviewed the clinical presentation and treatment of hepatitis E virus infection in the liver transplantation population. This is a well-written minireview with updated literature of the management recommendations for Hep E infection. If the authors can give a brief summary in the end of the review will be better, but not necessary.

Response: A conclusion was added to the manuscript.

Reviewer 7:

The minireview entitled "Management Recommendations: Clinical Presentation and Treatment of Hepatitis E Virus Infection in the Liver Transplantation Population" by Avin Aggarwal et al., is well-written, presented timely. The authors give a very comprehensive view of the management recommendations such as use of immunosuppressive treatment in liver transplantation, and use of steroids with regard to Hepatitis E Virus Infection.

Response: We appreciate the reviewer's kind words.

Once again, we appreciate the time that the reviewer and the editor have spent in bringing these points to our attention. We believe that the manuscript is now much improved, and we hope that the response has been adequate. We again appreciate your consideration for publishing this manuscript in *World Journal of Hepatology*.

