

13<sup>th</sup> of March 2016

Dear Editor, World Journal of Hepatology

**Title: Risk factors for deterioration of long-term liver function after radiofrequency ablation therapy**

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To the Editor:

We would like to thank for your careful review and helpful suggestions. We have updated the formatting of the manuscript and revised the text accordingly. The following constitutes a point response to the comments made by the reviewer:

**(1) Comments To Authors**

Multivariate analysis revealed that only Child-Pugh B score, PLT, and AST were risk factors of long-term poor liver function.

1. The number of patients with Child-Pugh B was small.

Although the number of patients with Child-Pugh (CP) B was small (n=21), a worsening CP score was confirmed for 10 patients among 21 CP-B patients. In the CP-A group (n=102), a worsening CP score was confirmed for 12 patients.

P-value analyzed with Chi-square test was 0.000.

Analysis with Cox's proportional hazards model showed that Hazard ratio was 5.07 (95 %CI 2.13-12.1, p=0.000).

2. PLT is not considered as a marker of liver function.

We think that platelet count is a marker of fibrosis. In this study, we demonstrate that the fibrosis marker is also associated with deterioration of liver function following RFA.

3. ALT is not a risk factors in their results. So, the conclusion and the results may be confused.

In this study, AST was identified as a risk factor for worsening CP score, but ALT was not.

About this result, we think that AST level shows hepatitis activity more clearly than ALT level in patients with cirrhosis.

We added COMMENTS at the end of the article and this text were checked by professional editor.

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We trust that this manuscript is now acceptable for publication in the *World Journal of Hepatology*.

Sincerely yours,

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