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PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology
Manuscript NO: 32770
Title: Impact of hepatitis C oral therapy in portal hypertension
Reviewer's code: 03429673
Reviewer's country: United States
Science editor: Yuan Qi
Date sent for review: 2017-01-24
Date reviewed: 2017-01-27

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
[ ] Grade A: Excellent	[ ] Grade A: Priority publishing	Google Search:	[ ] Accept
[Y] Grade B: Very good	[Y] Grade B: Minor language polishing	[ ] The same title	[ ] High priority for publication
[ ] Grade C: Good	[ ] Grade C: A great deal of language polishing	[ ] Duplicate publication	[ ] Rejection
[ ] Grade D: Fair	[ ] Grade D: Rejected	[ ] Plagiarism	[ ] Minor revision
[ ] Grade E: Poor		[Y] No	[Y] Major revision
		BPG Search:	
		[ ] The same title	
		[ ] Duplicate publication	
		[ ] Plagiarism	
		[Y] No	

COMMENTS TO AUTHORS

This manuscript draws our attention to an interesting and important topic that worth further investigation by better designed clinical studies with more standard methods for outcome measures and longer duration of follow-up. The effective DAA agents with higher SVR and better tolerance have expanded therapeutic options to more patients with varying degree of disease stages and changed the natural course of hepatitis C-related complications including portal hypertension. The favorable SVR rates have translated into improved clinical outcomes including hepatitis C-related mortality. It is highly relevant to further study the association between SVR and liver fibrosis regression which plays a significant role in the development of portal hypertension in this new era of hepatitis C treatment with all oral agents. The manuscript has mentioned a list of clinical findings suggestive of the positive impact of SVR obtained with hepatitis C treatment, especially the recent studies with new DAA agents, on portal hypertension . However, those clinical studies provide limited evidence due to the nature of suboptimal study design and conduction, and lack of standard methods to

evaluate progression of fibrosis as well as portal hypertension. It would be better if the manuscript would also address some of the challenges that we may face and possible solutions/alternatives in order to further explore this renewed interest. For example, reasonable inclusion/exclusion criteria for heterogeneous study population with different fibrosis stages, scientifically sound and ethically acceptable study designs, sufficient simple size to ensure the power for detection of differences, adequate duration of follow-up for clinical outcomes, appropriate data collection and statistical analysis to determine potential clinical predictors of improvement of fibrosis and portal hypertension, the pros and cons of methods in the evaluation of fibrosis, and the strengths and limitations of methods in the assessment of portal hypertension. Rather than simply raising the awareness, this strategy would be more useful to provide a realistic whole picture and lead the readers to the next step. This manuscript could also benefit from linguistic consultation.

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PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology
Manuscript NO: 32770
Title: Impact of hepatitis C oral therapy in portal hypertension
Reviewer's code: 03674603
Reviewer's country: Russia
Science editor: Yuan Qi
Date sent for review: 2017-02-14
Date reviewed: 2017-03-14

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
[ ] Grade A: Excellent	[ ] Grade A: Priority publishing	Google Search:	[ ] Accept
[Y] Grade B: Very good	[Y] Grade B: Minor language polishing	[ ] The same title	[ ] High priority for publication
[ ] Grade C: Good	[ ] Grade C: A great deal of language polishing	[ ] Duplicate publication	[ ] Rejection
[ ] Grade D: Fair	[ ] Grade D: Rejected	[ ] Plagiarism	[Y] Minor revision
[ ] Grade E: Poor		[Y] No	[ ] Major revision
		BPG Search:	
		[ ] The same title	
		[ ] Duplicate publication	
		[ ] Plagiarism	
		[Y] No	

COMMENTS TO AUTHORS

Only after your last letter, i have found previous letters in my spam. As for myself- i am not hepatologist, dealing with hepatic patients. Though, hepatic encephalopathy and portal hypertension development are in the area of our interests. The authors of editorial mamuscript ?Impact of hepatitis C oral therapy in portal hypertension? raised an important question on the determination of a point of no return (PNR) in the process of patients treatment, when further viral elimination along the process of SVR, can not prevent portal hypertension progression and liver decompensation. Apparently, this is hot topic, which is actively discussed by different groups, who start to apply new treatment options of HCV (i.e. DAAs). The authors very briefly outlined the importance of further determination of possible markers of PNR. To my nonprofessional opinion this may be hard challenging task,- how to select some biochemical markers, changes of which may be related to metabolic and signaling alterations in liver residentnal cells and endothelial cells, and resulting in observed liver architecture disturbances. All in all, as the question addressed to scientists , who are dealing with

the problem, this manuscript (NO: 32770) may be recommended for publication in the World Journal of Gastroenterology.