

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 35566

**Title:** Prediction of hepatocellular carcinoma development by APRI in primary biliary cholangitis

**Reviewer's code:** 00068723

**Reviewer's country:** Japan

**Science editor:** Ya-Juan Ma

**Date sent for review:** 2017-07-28

**Date reviewed:** 2017-07-28

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good	<input checked="" type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

## COMMENTS TO AUTHORS

The authors investigate the usefulness of APRI-rl for the prediction of HCC in PBC. They concluded that APRI-rl was a candidate for the prediction. Table 1a showed no correlation between the occurrence of HCC in PBC and AST, while lower platelet was correlated with HCC. The results were rationale because low platelet count was associated with liver cirrhosis. Apparently, the authors' conclusion was the same meaning as HCC occurred in advanced liver cirrhosis. The authors should clearly state the superiority of APRI-rl over platelet. Also serum bilirubin was strongly associated with HCC in PBC. This was rationale because higher serum bilirubin was also associated with advanced liver cirrhosis. The authors should discuss the reason why they chose APR-rl related with platelet, not serum bilirubin. Maybe liver fibrosis was one of the discussion points. It would be helpful if comparison of occurrence of HCC in PBC, autoimmune hepatitis (AIH), and viral hepatitis. The information would make clear the



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significance of not only the occurrence of HCC in PBC, but also this manuscript.



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## PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 35566

**Title:** Prediction of hepatocellular carcinoma development by APRI in primary biliary cholangitis

**Reviewer's code:** 00724450

**Reviewer's country:** Turkey

**Science editor:** Ya-Juan Ma

**Date sent for review:** 2017-08-17

**Date reviewed:** 2017-08-19

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

## COMMENTS TO AUTHORS

Dear Editor, Cheung et al. presented a study and they found that APRI score can be a good predictive marker for HCC development in PBC patients. I read the paper and I believe this can be a new finding and add some contributions to the literature even HCC patients were small number. I believe we need many more predictive markers for HCC risks patients and APRI score may be a good follow up marker for PBC patients. Manuscript was well written, method and results were good designed and discussion section was satisfactory. Thanks to authors for his paper...



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## PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 35566

**Title:** Prediction of hepatocellular carcinoma development by APRI in primary biliary cholangitis

**Reviewer's code:** 02567669

**Reviewer's country:** Germany

**Science editor:** Ya-Juan Ma

**Date sent for review:** 2017-08-17

**Date reviewed:** 2017-08-22

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

## COMMENTS TO AUTHORS

This paper deals with APRI-r1 as a novel prognostic marker for the development of HCC in patients with PBC. The cohort of 144 patients is of intermediate size. Using a lot of statistical calculations (partly difficult to understand for a gastroenterologist not completely familiar with these methods) the authors clearly show that this parameter, in particular in combination with treatment response to UDCA is a good prognostic parameter for the development of HCC. The paper may be published as is.



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## PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 35566

**Title:** Prediction of hepatocellular carcinoma development by APRI in primary biliary cholangitis

**Reviewer's code:** 01551089

**Reviewer's country:** China

**Science editor:** Ya-Juan Ma

**Date sent for review:** 2017-08-10

**Date reviewed:** 2017-08-23

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
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		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

## COMMENTS TO AUTHORS

1. It is noted that your manuscript needs careful editing by someone expertised in English paying attention to grammer, spelling, and sentnese structuer so that the introduction and results of the research are more clear. 2. Furthermore, there is a lack of explanation of statistical methods used in Signature Sequence Analysis(Line 171). 3. It is not clear why RNA structures obtained for sequences derived from T samples were not different from the corresponding NT samples in patients 2, 3 and 4(Line 264).

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 35566

**Title:** Prediction of hepatocellular carcinoma development by APRI in primary biliary cholangitis

**Reviewer's code:** 00013213

**Reviewer's country:** Egypt

**Science editor:** Ya-Juan Ma

**Date sent for review:** 2017-08-17

**Date reviewed:** 2017-08-24

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
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## COMMENTS TO AUTHORS

-Your retrospective study investigated the ability of APRI AND APRI-R1 tests in the prediction of HCC in PBC patients. Although your study included a relatively small sample size, yet your data indicated an AUROC of 0.77 for APRI-r1 in the predictive ability which is acceptable but not a robust one. Minor comments need your revision: 1-Page 13, lines 9-11: It is not appropriate to mention results of other studies compared to yours in results but better to be referred to in discussion. 2-Your data indicated that cirrhosis had high significant predictive ability for HCC with HR more than that of APRI-r1. Based on your data, why have not you tried to obtain a model using discriminative functional analysis and consuming both cirrhosis and APRI-r1. This may yield a more robust predictive index for HCC in PBC. 3-One of limitations of your study is the lack of validation cohort.