



PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 37323

Title: Development and predictive validity of the Cirrhosis-associated Ascites Symptom Scale: A cohort study of 103 patients

Reviewer's code: 00503536

Reviewer's country: Japan

Science editor: Ze-Mao Gong

Date sent for review: 2017-11-29

Date reviewed: 2017-12-05

Review time: 5 Days

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
<input checked="" 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 checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		BPG Search:	<input checked="" type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

The manuscript written by Riedel et al. describes that the authors developed a CAS scale and the scale is effective in discriminating between various severities of ascites. Although there are some other scales evaluating the QOL in chronic liver disease, the scale is specified to evaluate the impact of ascites severity on the QOL in patients with chronic liver diseases. The data are interesting and important, but there are some concerns that need to be addressed. Major points. 1. CAS scale scores could be affected not only by ascites severity but also other physical conditions such as severity of liver cirrhosis, treatment, anemia, or complication of hepatocellular carcinoma. It is unclear how the authors excluded the influence of those factors affecting the score. 2. How do the scores change after reduction of ascites by diuretics treatment? 3. It is still unclear how the CAS scales are superior to CLDQ or SF-36 in evaluating QOL and total



**Baishideng
Publishing
Group**

7901 Stoneridge Drive, Suite 501,
Pleasanton, CA 94588, USA
Telephone: +1-925-223-8242
Fax: +1-925-223-8243
E-mail: bpgoffice@wjgnet.com
https://www.wjgnet.com

management of in patients with chronic liver disease.



PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 37323

Title: Development and predictive validity of the Cirrhosis-associated Ascites Symptom Scale: A cohort study of 103 patients

Reviewer's code: 00053451

Reviewer's country: Japan

Science editor: Ze-Mao Gong

Date sent for review: 2017-11-29

Date reviewed: 2017-12-09

Review time: 10 Days

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 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 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 type="checkbox"/> No	

COMMENTS TO AUTHORS

Please make clear the advantage of the CAS scale over current scales in Discussion section.



PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 37323

Title: Development and predictive validity of the Cirrhosis-associated Ascites Symptom

Scale: A cohort study of 103 patients

Reviewer's code: 00502973

Reviewer's country: China

Science editor: Ze-Mao Gong

Date sent for review: 2017-11-29

Date reviewed: 2017-12-10

Review time: 11 Days

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 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 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 type="checkbox"/> No	

COMMENTS TO AUTHORS

In the current manuscript, the authors developed a questionnaire to scale the symptoms related to liver cirrhosis associated with ascites and to access its affects on the quality of life of patients. The authors also validated this scale in a group of patients. The study is interesting and would be helpful to evaluate cirrhotic ascites associated impairment of quality of life. However, the authors should clarify the following question: Did this CAS scale have any significance between severe/tense ascites and moderate/mild ascites? I wonder if this CAS scale was effective in discriminating severe ascites and mild ascites. If not, the authors should make some comments in the Discussion.



PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 37323

Title: Development and predictive validity of the Cirrhosis-associated Ascites Symptom Scale: A cohort study of 103 patients

Reviewer's code: 02942798

Reviewer's country: Slovakia

Science editor: Ze-Mao Gong

Date sent for review: 2017-11-29

Date reviewed: 2017-12-10

Review time: 11 Days

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 checked="" 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
<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
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		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

Dear sir, thank you to select me for reviewer of paper: Riedel AN. Development and predictive validity of the Cirrhosis-associated Ascites Symptom Scale: A cohort study of 103 patients. Authors designed a Cirrhosis-associated Ascites Symptom (CAS) scale. The final scale included 14 items describing symptoms with a potential detrimental impact on HRQL. 14 questions in CAS are accurately selected, they reflected real-life problems in the group of patients with cirrhosis and ascites. Authors found a strong correlation between the total CAS and CLDQ score (Liver specific QoL questionnaire) and a moderate correlation between the CAS and the EQ-5D-5L score (general QoL questionnaire) and between CAS and some CLDQ individual subscale parameters. Paper is well written, methodology, statistical analysis and discussion are adequate. Only minor changes are needed: 1) Please, add Ethic committee approval. 2) Please



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Pleasanton, CA 94588, USA
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explain in discussion, why CAS is better correlated with total CLDQ score than with all CLDQ individual subscale parameters (fatigue, activity, systemic symptoms, abdominal symptoms, emotional function and worry). 3) Please correct data in table 2. Data about creatinine levels are missing, data about Na levels are written in line creatinine, and data about potassium are written in line Natrium.



PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 37323

Title: Development and predictive validity of the Cirrhosis-associated Ascites Symptom Scale: A cohort study of 103 patients

Reviewer's code: 02438768

Reviewer's country: China

Science editor: Ze-Mao Gong

Date sent for review: 2017-11-29

Date reviewed: 2017-12-11

Review time: 11 Days

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
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		<input type="checkbox"/> No	

COMMENTS TO AUTHORS

Comments for ESPS Manuscript NO 37323 (1) General comments The study is interesting, and the contents would give some useful information. (2) Specific comments a) Major comments: Cirrhosis, if severe enough, can cause many different complications. Such complications may have an impact on many dimensions of health-related quality of life (HRQL), and the impact may be substantial. I wonder how the authors excluded the influence of such complications affecting CAS scale scores. b) Minor comments: The language needs to be improved.