

Response to Reviewers and Editors

We thank the editors and reviewers for the comprehensive and rapid review of our manuscript. Below are point-by-point responses to each of the queries raised by the reviewers.

Responses to Editorial Comments

1) Supported by: I have included the original notifications of the receipt of the award from the Troup Fund and the Patient-Centered Outcomes Research Institute.

2) Abstract

As requested, the sentence has been changed to:

a) Aim: To understand factors that promote hepatitis C virus (HCV) screening among primary care physicians (PCP).

b) In the body of the abstract, the requested format change of P values that were italicized have been accepted.

3) Key words

HCV is now spelled out as hepatitis C virus as requested.

4) Core Tip

The core has been uploaded as an MP3 audio file as requested.

5) Manuscript title and authors names have been added after the core tip as requested.

6) Article highlight: This section has been added as requested.

7) Figure title has been added as requested.

8) Table numbering: As requested, tables have been numbered consecutively.

9) General

All *P*-values have been italicized as per journal format.

All spaces preceding journal citations have been deleted in the text of the manuscript.

All instances of *i.e.* have been italicized as per journal format.

Reviewer 1:

Dear sir, thank you to select me for reviewing manuscript Samuel ST et al. Hepatitis C Virus Knowledge Improves HCV Screening Practices among Primary Care Physicians. The aim of the study was to specify factors that promote HCV screening among primary care physicians (PCP). Study had prospective design. A 45-item online questionnaire assessing knowledge of HCV natural history, risk factors, and treatment was distributed to 163 PCP, 91 PCP responded. Implementation of birth cohort screening was associated with awareness of the recommendations knowledge of HCV natural history and age-based screening recommendations was associated with HCV treatment knowledge. Paper is well written, statistical analysis and discussion are adequate. I recommend to publish manuscript in World Journal of Hepatology.

Response: We thank the reviewer for their review and comments on the manuscript.

Reviewer 2:

This study is well conducted and the results are interesting.

Response: We thank the reviewer for their review of this manuscript.

Reviewer 3:

Interesting and well written study.

Response: We thank the reviewer for their review of this manuscript.

Reviewer 4:

This study is very interesting and will contribute to the eradication of HCV infection. However, minor revisions are necessary. Clinicians are not familiar to these methods. The authors should revise the text, figures and tables to make readers to understand easily. 1. The figure legends are poor. The authors should explain the details of the figures. 2. The design of the tables is not good. It is difficult to understand the content of the tables. The tables should be revised.

Response: We thank the reviewer for these comments. 1. With respect to the figure legends, we have made the following sentences to improve the comprehension with respect to Fig 1a.

The data illustrate that HCV natural history knowledge is spread among three separate groups: those with low knowledge, the majority that has moderate knowledge, and a smaller group with vast knowledge.

In addition, we have added the following sentences to improve the comprehension of Fig 1b.

The plot illustrates the distribution of scores for PCP knowledge of HCV treatment. Out of a total of 19 possible points, most PCP knowledge scores were greater than 10 with knowledge symmetrically distributed around a score of 11.

2. With respect improving the clarity of the Tables, I have made the following modifications.

We have retitled Table 1 to the following: Information about the entire population invited to complete the survey (n=163).

We have added the following to the title of Table 2: Baseline characteristics of those individuals who responded to the survey (n=91) from among the entire population invited to complete the survey (n=163).

The following sentence has been added to the title of Table 3. The table illustrates those factors significantly associated with knowledge of HCV natural history.

The following sentence has been added to the title of Table 4: The table illustrates those factors significantly associated with knowledge of HCV treatment.

The following sentence has been added to the title of Table 5: The table illustrates those factors significantly associated with implementation of birth cohort screening recommendations.

As the data presented in Tables 6, 7, 8, and 9 are simply frequency counts without statistical manipulation, we believe that the titles as written accurately and easily communicate the points raised in the table. Therefore we have not added additional clarification, but we would be pleased to modify further if so desired.

Reviewer 5:

PCPs should be given the possibility of prescribing new antivirals, which are quite safe and could be managed by them. Unfortunately, only specialists are entitled to carry out this therapeutic approach, due to the high costs for the health care system. Only coupling screening and treatment by PCPs HCV infection could be eradicated. Also pharmaceutical firms could make efforts to improve knowledge and increase awareness through sponsored programs.

Response: Thank you for these comments. In response we have added the following sentences to the discussion.

Page 15: Linking HCV screening with treatment programs will also be tremendously important toward achieving the goal of eradication.

Page 14: Indeed, we would encourage pharmaceutical companies to continue to invest in PCP education through sponsorship of educational programs targeted to PCP.