



PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 37927

Title: Serum Autotaxin Levels Are Correlated with Hepatic Fibrosis and Ballooning in Patients with Non-alcoholic Fatty Liver Disease

Reviewer's code: 01555255

Reviewer's country: Italy

Science editor: Xue-Jiao Wang

Date sent for review: 2018-01-17

Date reviewed: 2018-01-18

Review time: 15 Hours

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

- Introduction section: The Author define liver biopsy as a the "gold standard" in the evaluation and assessment of NAFLD. This is correct. However, general limitations of liver biopsy are the costs, the not acceptance by patients, but also sampling error and inter- and intra-observer variability (Kobyliak Rev Recent Clin Trials. 2014). - Methods section: include the Country (Japan) were the study has been performed. I suggest also to describe briefly the serum assessment of ATX. Results section: Is essential to include the assessed values, as a APRI, ATX, FIB-4, and to discuss it. - Discussion section: in this section the Author can discuss the literature data on ATX, and in particular the serum values of ATX and the correlation between different NAFLD/NASH severity stage. This is necessary in the possible application of ATX in clinical practice, as a non-invasive marker of NAFLD staging.



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Name of journal: World Journal of Gastroenterology

Manuscript NO: 37927

Title: Serum Autotaxin Levels Are Correlated with Hepatic Fibrosis and Ballooning in Patients with Non-alcoholic Fatty Liver Disease

Reviewer's code: 01805500

Reviewer's country: Italy

Science editor: Xue-Jiao Wang

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Review time: 15 Hours

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

COMMENTS TO AUTHORS

Authors should give readers a complete view of this new proposed marker of fibrosis---at least it should be the aim--- (ATX) showing its sensitivity and specificity towards any fibrosis score at histology as well as the positive and negative predictive likelihood to better evaluate the reliability of ATX. A cost/benefit analysis is mandatory. Looking at the AUROCs of other fibrotic markers, authors should lessen of enthusiasm in their discussion because all in all ATX showed nearly always the worst performance with very few exceptions. The selected population suffering from NAFLD did not present high grade of obesity, nor dyslipidemia nor T2DM, thus it could be interesting to know the entity of abdominal adiposity, which is the main driver of hepatic steatosis, contributing also in worsening the prognosis of NAFLD, and is strongly linked to other co-morbidities as clearly emphasised in.....Should visceral fat be reduced to increase



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longevity? Ageing Res Rev. 2013 Sep;12(4):996-1004. In case it is not available this datum, i.e., WC or WHR, put this point as limitation to the study, referring to the afore-mentioned article.



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Name of journal: World Journal of Gastroenterology

Manuscript NO: 37927

Title: Serum Autotaxin Levels Are Correlated with Hepatic Fibrosis and Ballooning in Patients with Non-alcoholic Fatty Liver Disease

Reviewer’s code: 03024603

Reviewer’s country: Egypt

Science editor: Xue-Jiao Wang

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Review time: 1 Day

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

I revised the manuscript entitled “Serum Autotaxin Levels Are Correlated with Hepatic Fibrosis and Ballooning in Patients with Non-alcoholic Fatty Liver Disease” The study is interesting and well written; however I have the following comments: 1- The authors did not mention the sensitivity, specificity and accuracy of Autotaxin as a noninvasive marker; it should be added and described in details including the best cutoff value that gives the best accuracy. 2- The authors should add a comparison between the performance of Autotaxin and other noninvasive markers of fibrosis as: APRI, FIB-4 score etc...