

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Hepatology

**Manuscript NO:** 49432

**Title:** Lessons from “real life experience” of rifaximin use in the management of recurrent hepatic encephalopathy

**Reviewer’s code:** 00037028

**Position:** Editorial Board

**Academic degree:** PharmD

**Professional title:** Associate Professor

**Reviewer’s country:** United States

**Author’s country:** France

**Reviewer chosen by:** Li-Jun Cui (Quit in 2019)

**Reviewer accepted review:** 2019-07-01 14:26

**Reviewer performed review:** 2019-07-16 19:11

**Review time:** 15 Days and 4 Hours

| SCIENTIFIC QUALITY                                     | LANGUAGE QUALITY  | CONCLUSION                                 | PEER-REVIEWER STATEMENTS                      |
|--|---|--|---|
| <input type="checkbox"/> Grade A: Excellent            | <input type="checkbox"/> Grade A: Priority publishing       | <input type="checkbox"/> Accept            | Peer-Review:                                  |
| <input checked="" type="checkbox"/> Grade B: Very good | <input checked="" type="checkbox"/> Grade B: Minor language | (High priority)                            | <input checked="" type="checkbox"/> Anonymous |
| <input type="checkbox"/> Grade C: Good                 | polishing   | <input checked="" type="checkbox"/> Accept | <input type="checkbox"/> Onymous              |
| <input type="checkbox"/> Grade D: Fair                 | <input type="checkbox"/> Grade C: A great deal of           | (General priority)                         | Peer-reviewer’s expertise on the              |
| <input type="checkbox"/> Grade E: Do not               | language polishing  | <input type="checkbox"/> Minor revision    | topic of the manuscript:                      |
| publish  | <input type="checkbox"/> Grade D: Rejection                 | <input type="checkbox"/> Major revision    | <input checked="" type="checkbox"/> Advanced  |
|  |   | <input type="checkbox"/> Rejection         | <input type="checkbox"/> General              |
|  |   |  | <input type="checkbox"/> No expertise         |
|  |   |  | Conflicts-of-Interest:                        |
|  |   |  | <input type="checkbox"/> Yes                  |
|  |   |  | <input checked="" type="checkbox"/> No        |

## SPECIFIC COMMENTS TO AUTHORS



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This is a well thought out and nicely done study albeit with a somewhat small sample size. That is probably the major limitation of the study. I find it acceptable for publication, although I would recommend rewording the statement on line 367 as either "we cannot attest to the effectiveness," or "we cannot conclude that rifaximin is effective," for better clarity.

#### **INITIAL REVIEW OF THE MANUSCRIPT**

##### ***Google Search:***

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

##### ***BPG Search:***

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Hepatology

**Manuscript NO:** 49432

**Title:** Lessons from “real life experience” of rifaximin use in the management of recurrent hepatic encephalopathy

**Reviewer’s code:** 03730829

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Assistant Professor

**Reviewer’s country:** Egypt

**Author’s country:** France

**Reviewer chosen by:** Li-Jun Cui (Quit in 2019)

**Reviewer accepted review:** 2019-07-16 13:52

**Reviewer performed review:** 2019-07-19 21:23

**Review time:** 3 Days and 7 Hours

| SCIENTIFIC QUALITY                                     | LANGUAGE QUALITY  | CONCLUSION   | PEER-REVIEWER STATEMENTS                      |
|--|---|--|---|
| <input type="checkbox"/> Grade A: Excellent            | <input type="checkbox"/> Grade A: Priority publishing       | <input type="checkbox"/> Accept                    | Peer-Review:                                  |
| <input checked="" type="checkbox"/> Grade B: Very good | <input checked="" type="checkbox"/> Grade B: Minor language | (High priority)                                    | <input checked="" type="checkbox"/> Anonymous |
| <input type="checkbox"/> Grade C: Good                 | polishing   | <input type="checkbox"/> Accept                    | <input type="checkbox"/> Onymous              |
| <input type="checkbox"/> Grade D: Fair                 | <input type="checkbox"/> Grade C: A great deal of           | (General priority)                                 | Peer-reviewer’s expertise on the              |
| <input type="checkbox"/> Grade E: Do not               | language polishing  | <input checked="" type="checkbox"/> Minor revision | topic of the manuscript:                      |
| publish  | <input type="checkbox"/> Grade D: Rejection                 | <input type="checkbox"/> Major revision            | <input checked="" type="checkbox"/> Advanced  |
|  |   | <input type="checkbox"/> Rejection                 | <input type="checkbox"/> General              |
|  |   |  | <input type="checkbox"/> No expertise         |
|  |   |  | Conflicts-of-Interest:                        |
|  |   |  | <input type="checkbox"/> Yes                  |
|  |   |  | <input checked="" type="checkbox"/> No        |

## SPECIFIC COMMENTS TO AUTHORS

The authors investigated rifaximin use in the management of recurrent hepatic encephalopathy and in the prevention of acute exacerbations recurrence on persistent HE. The subject is interesting; However: -In introduction; you should add more data about the roles of rifaximin in patients with chronic liver diseases; e.g. prevention of SBP. 1) Elfert A, Abo Ali L, Soliman S, et al. Randomized-controlled trial of rifaximin versus norfloxacin for secondary prophylaxis of spontaneous bacterial peritonitis. Eur J Gastroenterol Hepatol. 2016 Dec;28(12):1450-1454. - You should add more data about other antibiotics that may have beneficial role in hepatic encephalopathy e.g. nitazoxanide. 2) Abd-Elsalam S, El-Kalla F, Elwan N, et al. A Randomized Controlled Trial Comparing Nitazoxanide Plus Lactulose With Lactulose Alone in Treatment of Overt Hepatic Encephalopathy. J Clin Gastroenterol. 2019 Mar;53(3):226-230. --In methods; Sample size calculation and the power of the study are so important in the study design and in the methods section as you are investigating rifaximin use in the management of recurrent hepatic encephalopathy and in the prevention of acute exacerbations recurrence on persistent HE. ; so is this sample sufficient or not? It is important question to answer to get a valid conclusion. --In discussion; you should clarify more to the readers the limitations of the study.

## **INITIAL REVIEW OF THE MANUSCRIPT**

### ***Google Search:***

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

### ***BPG Search:***



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- ☐ Plagiarism
- ☐ No

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Hepatology

**Manuscript NO:** 49432

**Title:** Lessons from “real life experience” of rifaximin use in the management of recurrent hepatic encephalopathy

**Reviewer’s code:** 00503572

**Position:** Editorial Board

**Academic degree:** MD, MSc

**Professional title:** Associate Professor, Professor

**Reviewer’s country:** Mexico

**Author’s country:** France

**Reviewer chosen by:** Li-Jun Cui (Quit in 2019)

**Reviewer accepted review:** 2019-07-01 18:34

**Reviewer performed review:** 2019-07-20 19:56

**Review time:** 19 Days and 1 Hour

| SCIENTIFIC QUALITY                                | LANGUAGE QUALITY  | CONCLUSION   | PEER-REVIEWER STATEMENTS                      |
|---|---|--|---|
| <input type="checkbox"/> Grade A: Excellent       | <input type="checkbox"/> Grade A: Priority publishing       | <input type="checkbox"/> Accept                    | Peer-Review:                                  |
| <input type="checkbox"/> Grade B: Very good       | <input checked="" type="checkbox"/> Grade B: Minor language | (High priority)                                    | <input checked="" type="checkbox"/> Anonymous |
| <input checked="" type="checkbox"/> Grade C: Good | polishing   | <input type="checkbox"/> Accept                    | <input type="checkbox"/> Onymous              |
| <input type="checkbox"/> Grade D: Fair            | <input type="checkbox"/> Grade C: A great deal of           | (General priority)                                 | Peer-reviewer’s expertise on the              |
| <input type="checkbox"/> Grade E: Do not          | language polishing  | <input checked="" type="checkbox"/> Minor revision | topic of the manuscript:                      |
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|   |   | <input type="checkbox"/> Rejection                 | <input type="checkbox"/> General              |
|   |   |  | <input type="checkbox"/> No expertise         |
|   |   |  | Conflicts-of-Interest:                        |
|   |   |  | <input type="checkbox"/> Yes                  |
|   |   |  | <input checked="" type="checkbox"/> No        |

## SPECIFIC COMMENTS TO AUTHORS

The manuscript entitled “Lessons from “real life experience” of rifaximin use in the management of recurrent hepatic encephalopathy” shows the results of a study that evaluates the effectiveness of rifaximin for prevention of recurrent episodes of HE and acute episodes in persistent HE. They compared previous therapeutic period with rifaximin vs therapeutic rifaximin period using the patient as its own control. They found reduction of number of episodes other parameters only for prevention of recurrent episodes and not for acute exacerbations in persistent HE patients. I have some concerns regarding the methodology used in this study. 1. Definition of “HE event” is not precise. Authors say that they used West Haven Criteria for detection of HE nevertheless there are several grades of HE. I want to think that they called “HE event” when clinical evident HE was detected. What happened if patient showed a significant improvement of HE without complete disappearance of the WH criteria? How was it considered? 2. The retrospective analysis of pretreatment period and prospective analysis of therapeutic one may be source of bias in the absence of blind evaluation of results. Treatment patients may be unintentionally favored. How can you assure that it did not happen? 3. The connotation of “real life experience” does not justify lack some rigorous evaluation and definitions of objectives. 4. English language of the manuscript needs some corrections. 5. I recommend authors modify the manuscript according with the comments and include discussion of limitations of this study.

## INITIAL REVIEW OF THE MANUSCRIPT

### *Google Search:*

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- ☐ No



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