

October 26, 2013

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 5217-review.doc).

Title: Lack of association between apolipoproteinC3 gene polymorphisms and risk of nonalcoholic fatty liver disease in Chinese Han population

Author: Tong-Hong Niu, Man Jiang, Yong-Ning Xin, Xiang-Jun Jiang, Zhong-Hua Lin, Shi-Ying Xuan

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The manuscript has been improved according to the suggestions of reviewers:

1 Format has been updated

2 Revision has been made according to the suggestions of the reviewer

(1) Abstract section was reformulated according to the suggestion of the reviewers and editors.

(2) As the reviewers indicated, there were some mistakes in the Methods, we checked the original data and corrected them (Page 3).

(3) According to the criteria of adult weight decision published by Chinese National Family Planning Council in 2013 ,we modified the criteria of obesity (Page 8, line 22).

(4) We cited "Sookoian S, Castaño GO, Burgueño AL, Gianotti TF, Rosselli MS, Pirola CJ. A nonsynonymous gene variant in the adiponutrin gene is associated with nonalcoholic fatty liver disease severity. J Lipid Res 2009; 50: 2111-2116 [PMID: 19738004 doi: 10.1194/jlr. P900013-JLR200]" (reference 10) which reporting the initial results of the relationship between PNPLA3 gene and the development of NAFLD.

(5) The APOC3 gene variant names were unified to -455C and -482T (Page6, line13).

(6) Core tip and comments were supplemented (Page2 and 9).

(7) The limitation section about the lack of the liver biopsy or elastography were added (Page 9).

(8) Explicit details of the measures were provided to ensure genotyping accuracy in the highlighted results section (Page 6).

(9) The method to describe the LD between typed variants were added using the Haploview software and was shown as D ' and included Power calculations to make explicit the effect size that the study was powered to detect (Page 6).

(10) According to suggestions of the reviewer, we supplemented the footnote for UA, p values and a trend line in Table 1 and Figure 1 .

(11) We excluded subjects with type1 diabetes mellitus in the exclusion criteria (page4).

(12) There is a different standard among different experimental instruments. Our instruments' standard testing are ALT (7-40) and AST (13-35), the original data has been checked and excluded the statistical problems.

(13) As reference 19, the control group subjects were lack of clinical and biochemical evidence of liver and metabolic disease and excluded with ALT > 35/30 IU/ ml in M/F, GGT > 35 IU/ml, BMI > 28, Abdominal circumference > 100 cm, GLU ≥100 mg/ dl, TG ≥150 mg/dl, HDL≤45/55 in M/F , a fatty liver index > 35 or alcohol abuse (>210/140 g/week in M/F) .

(14) The potential causes of a negative have been discussed in the paper such as: 1. The linkage disequilibrium with causal variants in different races. 2.The number of our study samples may be too low to detect a significant association. 3. The association of APOC3 polymorphisms and NAFLD may differ with ethnicity.

(15) Our experiment was more prone to a epidemiological investigation, the people of physical examination and outpatient services were mainly simple fatty liver disease. Cirrhosis or further diseases have not been mentioned in our study, which really need to explored.

(16) The NAFLD in this paper was diagnosed by a routine blood testing and liver ultrasonography, which can reduce the related cost and risk, but not very accurate. While the biopsy of livers are collecting for further studies.

(17) We have edited the letter by asking a professional service.

3 References and typesetting were corrected

Thank you again for publishing our manuscript in the World Journal of Gastroenterology.

Sincerely yours,



Tong-Hong Niu, MS

Medical College of Qingdao University, Qingdao, Shandong

P.R. CHINA

Fax: +86-532-88905293

E-mail: niutonghong2010@126.com



马景云 SCI 医学论文专家工作室

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EDITORIAL CERTIFICATE
(Ref. 2013-10-026)

To whom it may concern at *World Journal of Gastroenterology*:

We herein certify that we have edited the following manuscript by both our native English speaking editor and Chinese expert. The edited paper has reached grade A in language evaluation for SCI journals.

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First author and affiliations: Tong-Hong Niu, Medical College of Qingdao University, Qingdao 266021, Shandong Province, China

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Jing-Yun Ma Expert Group for SCI Biomedical Editing and Publishing
+86-10-82082089

Email: majingyun.editingoffice@aliyun.com

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