



## PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 56294

**Title:** GP73: A potential new prognostic biomarker in patients with chronic liver diseases

**Reviewer's code:** 02539210

**Position:** Peer Reviewer

**Academic degree:** PhD

**Professional title:** Associate Professor

**Reviewer's Country/Territory:** United States

**Author's Country/Territory:** Greece

**Manuscript submission date:** 2020-04-24

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2020-04-28 16:46

**Reviewer performed review:** 2020-05-11 19:19

**Review time:** 13 Days and 2 Hours

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



**Baishideng  
Publishing  
Group**

7041 Koll Center Parkway, Suite  
160, Pleasanton, CA 94566, USA  
**Telephone:** +1-925-399-1568  
**E-mail:** [bpgoffice@wjgnet.com](mailto:bpgoffice@wjgnet.com)  
**https://**[www.wjgnet.com](http://www.wjgnet.com)

#### **SPECIFIC COMMENTS TO AUTHORS**

The manuscript by Gatselis et al describes an analysis of GP73 as a potential marker for liver cirrhosis detection and predictor of disease progression. The study included over 600 patients with confirmed liver disease of varying etiologies. GP73 levels were measured retrospectively in serum samples, and these results were compared with other measures of liver function and disease staging metrics. A large subset were also followed longitudinally for disease progression and HCC development tracking. Elevated GP73 levels were found to be potentially useful as a diagnostic marker for cirrhosis detection (AUC of 0.909), comparing favorably with APRI. In addition, GP73 positive cirrhotic patients had a higher risk for worsening of disease or death, suggesting that elevated GP73 may be indicative of future disease progression. The manuscript is clear and thorough, with a large sample size a major strength. The title is a bit misleading. As the authors themselves make clear, GP73 has been evaluated repeatedly as a potential biomarker for liver disease, and thus use of the word "new" may not be appropriate. The use as a potential prognostic marker is more innovative, but does not seem to represent the overall conclusions well. One small point: the following statement from the discussion needs a citation. "Recent knock-down genetic studies in HepG2.2.15 cell lines provide further support as they proved that GP73 inhibition is related to a reduction of the inside surface area of the Golgi complex."