



## PEER-REVIEW REPORT

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

**Manuscript NO:** 57229

**Title:** Monitoring hepatitis C virus treatment rates in an Opioid Treatment Program: A longitudinal study

**Reviewer's code:** 03647444

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Academic Research, Doctor

**Reviewer's Country/Territory:** Italy

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

**Manuscript submission date:** 2020-06-09

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2020-06-15 06:51

**Reviewer performed review:** 2020-06-25 09:57

**Review time:** 10 Days and 3 Hours

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input checked="" 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 type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" 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



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

We read with great interest the study by Sanvisens et al. This study confirmed that the prevalence of HCV infection was high among patients with SUDs that were treated with methadone or buprenorphine. Only 50% of patients with an anti-HCV positive test were treatment naïve. Lower rates of treatment among patients with HCV mono-infection than among patients with HCV-HIV co-infection. However, the study lack of novelty since several other reports from different countries explored these aspects (PMID: 31178254, PMID: 30853642, PMID: 30174397). The authors should better underline the strength and the novelty of the study, maybe skipping most of the descriptive section and focusing on the predictive factors associated to DAA treatment. Moreover, they should better explain which would be the reason of this low treatment rate in the different subgroups.



### PEER-REVIEW REPORT

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

**Manuscript NO:** 57229

**Title:** Monitoring HCV treatment rates in an Opioid Treatment Program: a longitudinal study

**Reviewer's code:** 03763681

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Professor

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

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

**Manuscript submission date:** 2020-06-09

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2020-06-09 11:00

**Reviewer performed review:** 2020-07-06 14:28

**Review time:** 27 Days and 3 Hours

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
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<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



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## **SPECIFIC COMMENTS TO AUTHORS**

1. Editor's Comments to Author (if any): This study addresses a clinically relevant question and results add real-world data about the effectiveness of direct-acting antiviral agents in patients treated with methadone. However, it is unclear whether the population enrolled in this study represents a limited, very selected, part of the population of ex-drug users, suffering from chronic HCV infection. If the authors are able to clarify on the selection process of the studied population, it would be a really significant and valuable contribution to the paper. In particular: - 132 patients were not enrolled to receive treatment with DAA. What were the main reasons identified for those excluded ? (age, comorbidities, etc?) - Is it really impossible to add data about treatment compliance? This data would be extremely important and it would give a significant contribution to clinical practice. In fact, as you highlighted in the paper, patients with HCV-HIV coinfection were twice as likely to receive DAA treatment, compared to those with HCV mono-infection, related to the risk of low compliance rate of this population - Do you have data about the reinfection rate after DAA treatment of this cohort of patients?