

December 29, 2020

Dear Editor,

Please find enclosed the edited manuscript in Word format (File Name: 60448-Manuscript-File-revision.doc).

**Title:** Serum vitamin D and vitamin-D-binding protein levels in children with chronic hepatitis B

**Authors:** Cai-Zhi Huang, Jie Zhang, Lin Zhang, Cui-Hua Yu, Yi Mo, Li-Ya Mo

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

**Manuscript NO:** 60448

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

1 Format has been updated

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

**Reviewer : #1**

**Scientific Quality:** Grade B (Very good)

**Authors' response:** Thank you very much for your valuable comment

**Language Quality:** Grade B (Minor language polishing)

**Authors' response:** Thank you very much for your valuable comment. As required, we carefully polished the language throughout the manuscript

**Conclusion:** Minor revision

**Authors' response:** Thank you very much for your valuable comment. We carefully revised the manuscript according to the suggestions in the peer-review report

**Comment:** 1 Title reflect the main subject of the manuscript

**Authors' response:** Thank you very much for your valuable comment

**Comment:** 2 Abstract is good (it summarize and reflect the work described in manuscript)

**Authors' response:** Thank you very much for your valuable comment

**Comment:** 3 Key words is ok

**Authors' response:** Thank you very much for your valuable comment

**Comment:** 4 Background is adequate. However, the authors must update the number of infected by HBV: WHO estimate that in 2015, 257 million people were living with chronic hepatitis B infection, not ">350 million" as described by the authors

**Authors' response:** Thank you very much for your valuable comment. As required, we updated the number of people infected by HBV

**See Page: 4; Lines : 12-13 from the bottom.** The following sentence has been re-edited. [One third of the population around the world are infected by HBV, and it was estimated by WHO in 2015 that 257 million people were living with chronic hepatitis B infection. ]

**Comment:** 5 Methods: It was not described how many patients initially selected were excluded. Were all admitted patients selected?

**Authors' response:** Thank you very much for your valuable comment. As required, we added the information of the excluded patients and modified the paragraphs

**See Page: 5 ; Lines : 1-18 from the bottom and Page : 6 ; Lines : 1-7 from the top.** The following paragraphs have been re-edited. [This research was approved by the Ethics Committee of Hunan Children's Hospital. The study protocol conformed to the provisions of the Declaration of Helsinki. The diagnostic criteria and definitions for CHB were in accordance with the American Association for the Study of Liver Diseases 2018 Hepatitis B Guidance<sup>[13]</sup>. Hepatic fibrosis was classified according to the Scheuer Scoring System: grade 0, no fibrosis; grade 1, enlarged and fibrotic portal tracts; grade 2, periportal or portal-portal septal fibrosis but intact architecture; grade 3, fibrosis with architectural distortion but no obvious cirrhosis; and grade 4, probable or definite cirrhosis.

We selected 257 children with CHB who were admitted to Hunan Children's Hospital in summer and autumn between 2018 and 2019, along with 170 randomly selected healthy controls. Patients were excluded from the present analysis if they met the following exclusion criteria: (1) patients with infectious liver disease caused by pathogens other than HBV and with other liver diseases such as autoimmune liver disease; (2) patients with malignant tumors; (3) patients who have received immunomodulatory therapy or taken vitamin D preparations in the past 4 wk; (4) patients with comorbidities that may affect the serum levels of vitamin D and VDBP, including malnutrition, renal disease and diabetes;

and (5) repeated patients during the study period. Lastly, 53 of the patients were excluded and a total of 204 children were enrolled in the analysis.

The enrolled patients included: 193 hepatitis B surface antigen (HBsAg) positive and 11 HBsAg negative; 164 hepatitis B e antigen (HBeAg) positive and 40 HBeAg negative; 164 with detectable HBV DNA and 40 with undetectable HBV DNA; 131 with HBV genotype B and 23 with HBV genotype C, and 50 without genotyping due to refusal of guardians; and 124 with histopathological determination of grade of hepatic fibrosis (27 grade 0, 74 grade 1, 12 grade 2, 9 grade 3 and 2 grade 4), and 80 without histopathological examination because of refusal of guardians. The flow chart of the study is shown in [Figure 1.](#) ]

**Comment:** 6 Results are ok

**Authors' response:** Thank you very much for your valuable comment

**Comment:** 7 Discussion: ok

**Authors' response:** Thank you very much for your valuable comment

**Comment:** 8 Illustrations and tables: ok

**Authors' response:** Thank you very much for your valuable comment

**Comment:** 9 Biostatistics: ok; Units used: ok

**Authors' response:** Thank you very much for your valuable comment

**Comment:** 10 References: ok

**Authors' response:** Thank you very much for your valuable comment

**Comment:** 11 The manuscript is well, concisely and coherently organized and presented. Language and grammar are appropriated

**Authors' response:** Thank you very much for your valuable comment

**Comment:** 12. The STROBE checklist is ok

**Authors' response:** Thank you very much for your valuable comment

**Comment:** 13 The manuscript met the requirements of ethics

**Authors' response:** Thank you very much for your valuable comment

3 References and typesetting were corrected

We have carefully revised our manuscript according to the Editorial Office's comments and suggestions and the Criteria for Manuscript Revision.

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

Sincerely yours,

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