

Reviewer #1:

Scientific Quality: Grade B (Very good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Accept (High priority)

Specific Comments to Authors: The title of the manuscript fully reflects the content. The abstract and keywords summarize the content of the manuscript. The introduction is short, clear and understandable. The research methods are described in detail and quite well in the manuscript. The results of the study are described in detail and well. The discussion briefly, clearly and logically highlights the key points. The results are well presented, comparison of the results with previous studies and their relevance. The results of the study are very relevant for clinical practice. The charts and tables are of good quality and properly illustrate the content of the article. There are self-citations that could be avoided if a short summary of the previous data was included in the text. On the whole, the manuscript is well written, concise and consistent. On the whole, the manuscript is well written, concise and consistent, and meets ethical requirements.

Response: Thank you for your comment. In the article where there were self-citations, I've replaced it with a short summary of the previous data.

Reviewer #2:

Scientific Quality: Grade B (Very good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Accept (General priority)

Specific Comments to Authors: Excellent topic. Please revise for grammar errors.

Response: Thank you for your comment. The revised manuscript was polished by American Journal Experts as you can see in the language editing statement.

Reviewer #3:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Major revision

Specific Comments to Authors: Dear authors! I read with interest your manuscript

entitled "192 weeks treatment of entecavir maleate for Chinese chronic hepatitis B predominantly genotyped B or C" which is based on the data obtained in double-blind prospective study and provides follow-up information to previously published results (J Viral Hepat. 2017 Oct;24(10):877-884. doi: 10.1111/jvh.12710), where the same cohort was assessed at wk 144 and 2 reports of the assessment at wk 48. According to the results, entecavir maleat shows potent viral suppression and has good safety profile. However, the study design undermines that subjects received open-label treatment with entecavir maleat after wk 49. This makes the novelty of the results questionable as comparative efficacy has already been reported in 3 publications.

Response: Thank you for your comment. We admit this is a disadvantage of our study and add it in the limitation part.

#Moreover, the current data are in conflict with the previously reported in terms of HBV DNA decline from baseline: at wk 144 for HBe-negative group it was (by 6.13 log₁₀ IU/mL vs B: by 5.65 log₁₀ IU/mL), whereas now it turned out to be 6.05 log₁₀ IU/mL vs. 6.03 log₁₀ IU/mL, accordingly, while the number of subjects remained unchanged and the percentage of people with undetectable HBV DNA was 100% at both points.

Response: Thank you for your comment. There was one subject with HBV-DNA data missing at week 192 in group A in HBe-negative group, but he was not lost to follow up.

#As mentioned in previous review of unpublished manuscript 74505, where the data of 240 weeks of entecavir maleat were discussed, efficacy of treatment with NUCs may depend on liver fibrosis. Although no assessment of liver fibrosis with histological examination and/or liver stiffness measurement was performed initially, it may be possible to retrieve these data based on blood tests (for example, Fib-4, APRI, Forns index etc).

Response: Thank you for your comment. Fib-4 index up to 144 weeks was already calculated and published in World Journal of Gastroenterology (PMID: 26604649). It reported that the dynamic changes of FIB-4 index did not differ from baseline to week

144 between groups A and B.

#The data about concomitant medications and analysis of compliance should be given as well.

Response: Thank you for your comment. Concomitant medications and missed doses were recorded at each visit. Participants were asked to return any unused tablets at the next clinic visit. Concomitant drugs were mainly some antibiotics or proprietary Chinese medicines and did not include drugs with antiviral activity, so it's not reflected in the original manuscript. Most patients (>80%) showed good compliance with no missed doses.

#Please, provide the data on the set of primers used for PCR analysis.

Response: Thank you for your advice. We've added the primers used for PCR analysis in the assay methods.

#It is not clear why to include the data of patient who developed resistance to entecavir at week 96 to the final analysis, as further effect of treatment (decline of HBV DNA level) is caused by the switch to ADV (not the effect of ETV maleat)
Please, provide clear Clinical trial registration statement.

Response: Thank you for your comment. In the study design section in supplementary materials, we described that those patients with add-on ADV therapy were excluded from the efficacy analysis since week 100.

#Table 2 is not organized according to 3-lines requirement. Please, remove in-built footnotes from tables 1, 3 and 4.

Response: Thanks for your comment. We've changed the form of tables into 3-lines requirement, removed in-built footnotes from figure 1, 3 and 4.

#The study obviously had supportive foundation, please, revise the statement on the page 2.

Response: Thanks for your comment. We've added the supportive foundation on the

title page.

#The manuscript requires language polishing and formatting according to the journal requirements.

Response: Thank you for your comment. We've made several adjustments according to the guideline and format for clinical trials study presented on the journal website.

Science editor:

1.1 Conflict of interest statement: Academic Editor has no conflict of interest. 1.2 Manuscript's theme: The topic is within the scope of the journal. 1.3 Academic misconduct: No academic misconduct was found. 1.4 Scientific quality: The authors submitted a manuscript investigating 192 weeks treatment of entecavir maleate for Chinese chronic hepatitis B predominantly genotyped B or C. The manuscript is overall qualified. (1) Advantages and disadvantages: The reviewers have given positive peer-review reports for the manuscript. On the whole, the manuscript is well written, concise and consistent, and meets ethical requirements. However, it requires at least major revision. (2) Main manuscript content: The authors state the purpose of the study clearly, the study design is appropriate and feasible, and the statistical methods used are correct. However, the methods and the Discussion section still require a further revision according to the detailed comments listed below. (3) Table(s) and figure(s): There are 3 tables and 3 figures, and some of them should be improved. Detailed suggestions for each are listed in the specific comments section. (4) References: A total of 34 references are cited, including 0 published in the last 3 years. There are 2 self-cited references of the authors. The cited references are overall sufficient and reasonable. The reviewer suggested that there are self-citations that could be avoided if a short summary of the previous data was included in the text. 1.5 Language evaluation: The English-language grammatical presentation needs to be improved to a certain extent. There are many errors in grammar and format, throughout the entire manuscript. The reviewer suggested that the manuscript requires language polishing and formatting according to the journal requirements. Before final acceptance, the author(s) must provide the English Language Certificate issued by a professional English language editing company. Please visit the following website for

the professional English language editing companies we recommend: <https://www.wjgnet.com/bpg/gerinfo/240>. 1.6 Medical ethics: The authors described the Institutional Review Board approval and properly reported on the informed consent (statement in the manuscript). 1.7 Specific comments: The title of the manuscript fully reflects the content. The abstract and keywords summarize the content of the manuscript. The introduction is short, clear and understandable. The research methods are described in detail and quite well in the manuscript. The results of the study are described in detail and well. The discussion briefly, clearly and logically highlights the key points. The results are well presented, comparison of the results with previous studies and their relevance. The results of the study are very relevant for clinical practice. The charts and tables are of good quality and properly illustrate the content of the article. There are self-citations that could be avoided if a short summary of the previous data was included in the text. On the whole, the manuscript is well written, concise and consistent. On the whole, the manuscript is well written, concise and consistent, and meets ethical requirements. Excellent topic. Please revise for grammar errors.

Response: Thank you for your comment. We've sent the revised manuscript to American Journal Experts for revision. Figures and tables were improved according to the journal requirements. Self-citations have been avoided. Some of the references were updated to latest research.

Company editor-in-chief:

I have reviewed the Peer-Review Report, the full text of the manuscript, and the relevant ethics documents, all of which have met the basic publishing requirements of the World Journal of Clinical Cases, and the manuscript is conditionally accepted. I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report, Editorial Office's comments and the Criteria for Manuscript Revision by Authors. Before final acceptance, uniform presentation should be used for figures showing the same or similar contents; for example, "Figure 1 Pathological changes of atrophic gastritis after treatment. A: ...; B: ...; C: ...; D: ...; E: ...; F: ...; G: ...". Please provide the original figure documents. Please prepare and arrange the figures using PowerPoint to ensure that all graphs or arrows or text portions can be reprocessed by

the editor. In order to respect and protect the author's intellectual property rights and prevent others from misappropriating figures without the author's authorization or abusing figures without indicating the source, we will indicate the author's copyright for figures originally generated by the author, and if the author has used a figure published elsewhere or that is copyrighted, the author needs to be authorized by the previous publisher or the copyright holder and/or indicate the reference source and copyrights. Please check and confirm whether the figures are original (i.e. generated de novo by the author(s) for this paper). If the picture is 'original', the author needs to add the following copyright information to the bottom right-hand side of the picture in PowerPoint (PPT): Copyright ©The Author(s) 2022. Authors are required to provide standard three-line tables, that is, only the top line, bottom line, and column line are displayed, while other table lines are hidden. The contents of each cell in the table should conform to the editing specifications, and the lines of each row or column of the table should be aligned. Do not use carriage returns or spaces to replace lines or vertical lines and do not segment cell content. Before final acceptance, when revising the manuscript, the author must supplement and improve the highlights of the latest cutting-edge research results, thereby further improving the content of the manuscript. To this end, authors are advised to apply a new tool, the RCA. RCA is an artificial intelligence technology-based open multidisciplinary citation analysis database. In it, upon obtaining search results from the keywords entered by the author, "Impact Index Per Article" under "Ranked by" should be selected to find the latest highlight articles, which can then be used to further improve an article under preparation/peer-review/revision. Please visit our RCA database for more information at: <https://www.referencecitationanalysis.com/>.

Response: Thank you for your comment. Figures and tables were arranged and uploaded according to the journal requirements. Some of the references were updated to latest research.