

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 78584

Title: Red blood cell distribution width derivatives in alcohol-related liver cirrhosis and

metabolic-associated fatty liver disease

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05117781 Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Chief Doctor, Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: Poland

Manuscript submission date: 2022-07-04

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-07-05 00:35

Reviewer performed review: 2022-07-06 02:16

Review time: 1 Day and 1 Hour

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [Y] Accept (General priority) [] Minor revision [] Major revision [] Rejection
Re-review	[Y]Yes []No



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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

statements

Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Agata et al retrospectively explored the value of RDW, RPR and RLR in 142 ALC patients and 92 MAFLD. They concluded that RDW with its derivatives appear to be valuable diagnostic markers in patients with ALC. Compared with their previous published papers (doi:10.3748/wjg.v26.i47.7538 and doi:10.1155/2021/8867985), this manuscript seems used the similar clinical data and studied different indices. In general, this manuscript has certain novelty, and the English writing is well. But there were some concerns need to be addressed. 1. My major concern is the bias caused by the clinical confounders that affect the levels of RDW with its derivatives, since the authors has showed other hematological indices (NLR, PLR and MPR) associated with ALC and MAFLD patients, I suggested that they performed the comparison of RDW, RPR and RLR with other hematological indices to reduce the influence of potential clinical confounders. 2. Is it the data of Table 2, Table 3 and Table 4 correctly present, why each data presented separately, shouldn't they present as Table 1? 3. The text of Figures were overlapped with the square frame of AUC, could they be separated from the curve. 4. There remains several spell mistakes in the manuscript. For example, in the "Procedures" section, "NAFLD" was used instead of "MAFLD", "Conentrations" was misspelling in the first paragraph of Discussion section.



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Reviewer's code: 05122735 Position: Peer Reviewer

Academic degree: Doctor, MD, PhD

Professional title: Chief Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: Poland

Manuscript submission date: 2022-07-04

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-07-04 23:57

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Review time: 8 Days and 1 Hour

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [] Minor revision [Y] Major revision [] Rejection
Re-review	[Y]Yes []No



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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

statements Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Title: Red blood cell distribution width derivatives in liver disorders Ref number: 78584 First author: Agata Michalak This is a very interesting study, which aimed to evaluate a group of peripheral inflammatory biomarkers [red blood cell distribution width (RDW), RDW-to-platelet ratio (RPR) and RDW-to-lymphocyte ratio (RLR)] and liver fibrosis in 142 patients with alcoholic liver cirrhosis (ALC) and 92 with metabolic associated fatty liver disease (MAFLD); 68 persons were included as controls. The results showed that peripheral inflammatory biomarkers were obviously higher in patients with ALC and MAFLD. Further, these peripheral factors showed an excellent performance to predict ALC, judged by AUC values. The paper was well written. However, some concerns need to be further addressed. 1. Inflammation was believed to be involved in the development of liver fibrosis in both alcoholic and non-alcoholic status. The most common factor to evaluate systemic inflammation was high-sensitivity CRP. Did the author collect the data? 2. The advantage of these peripheral inflammatory biomarkers were easily to be obtained; however, it might be affected by many diseases such as anemia. How to exclude the potential effects of these confounding? 3. A flow chart for enrolling the participants might be necessary. 4. As Spearman Correlation did not take confounding into consideration, it might be appropriate to analyze the data by multi-variates linear regression. For example, BMI was a important factor contributing liver fibrosis in both alcoholic and non-alcoholic liver diseases. 5. Did these peripheral inflammatory biomarkers differ in different sex or age groups? 6. The description of baseline characteristics was helpful to get a general impression of study population. 7. Are there any limitations in the current study? The study design might be a



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cross-sectional study with small sample size. We did not know whether peripheral inflammatory biomarkers or liver fibrosis appeared first.



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Reviewer's code: 03204757 Position: Peer Reviewer Academic degree: MD

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Reviewer's Country/Territory: China

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Scientific quality	[] Grade A: Excellent [] Grade B: Very good [] Grade C: Good [Y] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [] Minor revision [Y] Major revision [] Rejection
Re-review	[]Yes [Y]No



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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

SPECIFIC COMMENTS TO AUTHORS

The study investigated the values of RDW, RPR and RLR in ALC patients and MAFLD patients, and the correlations were analyzed between the value and the parameter of liver fibrosis, respectively. The results indicate that RDW derivatives can be as diagnostic markers for ALC or MAFLD patients. Some issues in this paper, however, should be raised. 1. About the title, it is no suitable for use of "liver disorders" in the title. The role of RDW derivatives should be discussed in a certain disease rather than a broad one. In addition, the RDW derivatives were studied in ALC and MAFLD patients, but there was no association presented about the RDW derivatives between the two illnesses. So, the data provided in this paper cannot provide a meaningful and a clear conclusion. 2. About the so-called "indirect and direct indices of liver fibrosis". Actually, all the serological markers, including the assessing models (APRI, FIB-4, etc), are the indirect indices. Liver biopsy is still the gold-standard approach for the assessment of liver fibrosis or cirrhosis. Due to the lack of pathological data in these patients, the analyses on the RDW derivatives as well as their association with the serological markers cannot provide compelling and reliable evidences to support the conclusions in the study. 3. This study is a retrospective one, so the authors should explain how to keep or obtain the serum samples for detecting the serological markers of liver fibrosis in the section of method. 4.In the section of discussion, the authors mentioned "HEV infection". Hepatitis E is an acute liver disease, so it is not meaningful to discuss the indicators of liver fibrosis assessment in HEV infection. 5.MAFLD has a broad spectrum of disease, so the results suggest that the RDW derivatives have high diagnostic accuracy in ALC patients, but what the results will be if the majority of MAFLD are NASH



patients. This is also a defect of the study.



RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Academic degree: Doctor, MD, PhD

Professional title: Chief Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: Poland

Manuscript submission date: 2022-07-04

Reviewer chosen by: Chen-Chen Gao

Reviewer accepted review: 2022-08-23 08:21

Reviewer performed review: 2022-08-23 08:29

Review time: 1 Hour

Scientific quality	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [Y] Accept (General priority) [] Minor revision [] Major revision [] Rejection
Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous



statements

Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

The author corresponded well to all my concerns, I have no further comments