

PEER-REVIEW REPORT

Name of journal: *World Journal of Gastroenterology*

Manuscript NO: 80354

Title: Metabolic dysfunction associated fatty liver disease: The new nomenclature and its impact

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03765308

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Doctor, Professor

Reviewer's Country/Territory: Taiwan

Author's Country/Territory: Singapore

Manuscript submission date: 2022-09-24

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-10-01 06:47

Reviewer performed review: 2022-10-08 03:07

Review time: 6 Days and 20 Hours

Scientific quality	<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 Grade E: Do not publish
Judgment by peer reviewers	Does this manuscript meet the code of ethics standards? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Does this manuscript have important novelty? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Does this manuscript have important creativity or innovation?

	<input type="checkbox"/> [J31] Yes <input type="checkbox"/> [J30] No Does this manuscript use reliable research methods? <input type="checkbox"/> [J41] Yes <input type="checkbox"/> [J40] No Are the manuscript-accompanying data and figures authentic? <input type="checkbox"/> [J51] Yes <input type="checkbox"/> [J50] No Does this manuscript make scientifically significant conclusions? <input type="checkbox"/> [J61] Yes <input type="checkbox"/> [J60] No
Language quality	<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
Conclusion	<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
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

Summary This review included 31 articles that concerns about the different between MAFLD and NAFLD. Different in 5 major sections that included 1. Clinical data, 2. Steatosis and fibrosis, 3. Outcomes, 4 cardiovascular diseases and metabolic syndrome, 5. pathophysiology were discussed. The literature review may be great but mostly directly record the findings of publish article. It will be more helpful to add summary tables or figures on each section.

Comments 1. Please give a Table to show the diagnosis different between MAFLD and NAFLD. 2. MAFLD is a complex phenotype shaped by the dynamic interaction of genetic predisposition with environmental factors and components of the metabolic syndrome. MAFLD includes a mixture of different etiologies of liver diseases. Prevalence of alcoholic liver disease, viral hepatitis could be different in the study areas. What we are concerned about is MAFLD could represent



**Baishideng
Publishing
Group**

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

different diseases in different study. Is it possible to give us a general view about MAFLD of single etiology or dual etiologies. 3. Tables 1-5 list all the references studied. This is great to understand each paper but is difficult to produce a clear over all concept. Is it possible to put current Table 1-5 into supplementary Tables, and then give 1-2 new Tables and/or Figures to summarize the results of each Table. This will help the reader to catch the current knowledge easily. 4. Please add the criteria of obesity/overweight in the Figure 1. 5. Please use "different between MAFLD and NAFLD" in each Table.

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Reviewer's code: 03471631

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Professor

Reviewer's Country/Territory: China

Author's Country/Territory: Singapore

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Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-10-16 01:53

Reviewer performed review: 2022-10-20 13:23

Review time: 4 Days and 11 Hours

Scientific quality	<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
Judgment by peer reviewers	Does this manuscript meet the code of ethics standards? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Does this manuscript have important novelty? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Does this manuscript have important creativity or innovation?

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Peer-reviewer statements	Peer-Review: <input type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

The review is well written with new findings. Some minor issues should be reviewed before publication. In the last sentence of the results in the abstract, "Within the subtypes of MAFLD, patients with more metabolic conditions at the time of diagnosis had worse hepatic and liver injury compared to those with a single metabolic condition." worse hepatic and liver injury might be wrong. Page6, Line8: The sentence "noted that MAFLD patients have a 1.7-fold higher risk of all-cause mortality" does not make clear with which group of people. Page6, Line18-22: The sentence "Interestingly, the overweight (BMI BMI \geq 25.0 kg/m²) subgroup was not associated with cancer-related mortality while the metabolic dysregulation subgroup (lean individuals with \geq 2 metabolic risk factors among non-diabetic participants) was only associated with all-cause mortality, suggesting that T2DM is the most multifaceted cause of mortality in



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160, Pleasanton, CA 94566, USA
Telephone: +1-925-399-1568
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<https://www.wjgnet.com>

MAFLD patients." Page6, Line24-26: The sentence "A suggested explanation is that on top of proinflammatory, pro-atherogenic and diabetogenic mediators released by livers of patients with NAFLD, the constant exposure to hyperglycaemia and raised concentrations of circulating insulin stimulated cancer progression". Does "NAFLD" mean "MAFLD"? Page6, Line27: The sentence "Age and gender seem to play an invariable role in the mortality risks of MAFLD patients too." What does "invariable" mean, please double check this sentence? Page7, Line28: The sentence "NAFLD is tied very closely to cardiovascular diseases (CVD), with cardiovascular diseases being the most important cause of death in NAFLD patients." Does "NAFLD" mean "MAFLD"?