

Dear Editors and Reviewers:

Thank you for your comments regarding our manuscript. We have carefully revised the manuscripts in line with your suggestions.

Reviewer #1:

This study is an interesting study that investigates the risk factors for the progression of advanced liver disease in patients with chronic hepatitis B and NAFLD. Some key points:

1. The authors need to better stratify NASH and NAFL (NAFLD non-NASH patients).

A: Thank you for your suggestion. We have stratified the NAFLD group into the NASH and non-NASH groups. First, three out of 21 patients in the NASH group and seven out of 88 patients in non-NASH group developed cirrhosis. The results of K-M survival analysis after PSM are shown in Figure 2,C. There was no statistical difference between the two groups ($P=0.17$). Second, when NAFLD was divided into the NASH group with 32 patients (3 HCCs) and the non-NASH group with 120 patients (3 HCCs), the risk of HCC in the NASH group was increased (log rank, $p=0.03$) (Figure 3,C).

2. Discussion is longer than needed, it can be summarized.

A: We have greatly simplified and rewritten the discussion section.

3. The abstract needs major language improvement.

A: We invited native English specialists to polish the language again.

Reviewer #2:

This study investigated the risk factors for the progression of advanced liver disease in patients with chronic hepatitis B and NAFLD. The study provided some valuable information. However, some revisions are required to improve the presentation.

1. Several data are analyzed in the results for patients with NAFLD, however, the conclusion was made for NASH.

A: We NAFLD stratified according to the presence of NASH in the revised version, and found that NASH had little correlation with the formation of cirrhosis, but the risk factors of HCC. We have added this detail in the revised manuscript.

2. The hepatitis B viral infection ratio should be updated, which can reference the latest data from the Worldwide prevalence of hepatitis B virus and hepatitis C virus among patients with cirrhosis at country, region, and global levels: a systematic review.

A: Thanks for your suggestion. We have cited a suitable reference.

3. A reference is needed for 'Another large multicenter multi-ethnic cohort study of 1089 patients with CHB showed that liver steatosis confirmed by biopsy was not significantly associated with clinical outcomes (HCC and death).'

A: We have cited the reference and have appropriately discussed the report.

4. In Table 1, the number of cases was calculated wrong.

A: Thanks for pointing this out. We have recalculated and corrected the numbers.

5. Check the spelling of words in Table 5.

A: We have corrected the spellings.

6. High-resolution figures are needed for Figure 5. All the figure legends are too simple, and detailed information should be added.

A: We remade Figure 5 and have added each figure legend.

7. The discussion is too long, lots of information was not necessary, and more comparisons of current findings with other literature reports are needed.

A: We have greatly simplified and rewritten the discussion section.