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Re: Recent Advances in the Diagnosis of Drug-Induced Liver Injury

Manuscript ID: 88578

Dear Sir/Madam,

We are resubmitting our invited manuscript on *Recent Advances in the Diagnosis of Drug-Induced Liver Injury (DILI)* for consideration of publication in *World Journal of Hepatology*.

We have addressed the reviewer's comments as indicated below. The manuscript has been lengthened substantially (an additional 600 words) with multiple additional references as requested by the reviewer.

1. In the discussion of exclusive diagnosis, the author should include more clinical research, such as the differential diagnosis of autoimmune liver disease, biliary tract disease, and vascular liver disease.

We appreciate the comments. The manuscript has been amended as requested with additional references.

2. The author, in summarizing the diagnosis of drug-induced liver injury, did not mention factors related to genetic background, which might reduce the liver's tolerance to drugs.

We appreciate the comments. The manuscript has been amended with additional references.

3. The manuscript should include the timing and indications of liver biopsy for DILI. We appreciate the comments. The manuscript has been amended to highlight this.

4. The manuscript mentions that "a decrease in ALT >50% from the upper limit of normal within 8 days without a subsequent uptrend in one month highly suggestive of DILI". It is recommended to supplement the treatment plan for the primary disease and the intervention plan for liver injury during this period.

We appreciate the comments. It was unclear what this meant. The primary disease is drug-induced liver injury which does not have a specific treatment except for stopping the drug.

5. The manuscript, in the liver biopsy section, mentions that different classes of DILI behave differently, and it is best for the author to add specific data to support this.

We appreciate the comments. The manuscript has been amended to reflect this.

Sincerely,

Jawad Ahmad MD, FRCP, FAASLD