



PEER-REVIEW REPORT

Name of journal: *World Journal of Gastroenterology*

Manuscript NO: 72011

Title: Gadolinium-ethoxybenzyl-diethylenetriamine penta-acetic acid-enhanced magnetic resonance imaging for evaluating fibrosis regression in patients with chronic hepatitis C after direct-acting antiviral therapy

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05334153

Position: Peer Reviewer

Academic degree: MD

Professional title: Assistant Professor

Reviewer's Country/Territory: Egypt

Author's Country/Territory: China

Manuscript submission date: 2021-09-30

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-10-07 01:47

Reviewer performed review: 2021-10-19 07:20

Review time: 12 Days and 5 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
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 checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection



Re-review	[<input checked="" type="checkbox"/>] Yes [<input 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

Specific comments to authors: Li and co-others in this manuscript report on the use of Gadolinium-ethoxybenzyl-diethylenetriamine penta-acetic acid-enhanced MRI for evaluating fibrosis regression in patients with chronic hepatitis C. Congratulations upon completing such an important and complex study. The manuscript is properly written and of academic and clinical interest, although the authors need to address some points as follows. Major comments: - Please mention if the patients have any comorbid conditions that can affect the results of the APRI score and LSM. You only excluded other hepatic conditions rather than HCV. But what about other diseases like ITP, SLE, chronic hemolytic anemias, NASH, and others. - Please mention why did you exclude treatment regimen that included IFN? In my point of view it dose not affect the aim of the study. Please clarify. -You mentioned that your study is retrospective??!! Going through your methodology, it is considered a prospective study. It is not a routine to do a liver biopsy and a dynamic MRI pre and post treatment in patients with HCV. -

You mentioned in the methods section that "SVR was defined as an undetectable HCV RNA at 24 weeks after the end of treatment". Please correct, as with DAAs, SVR is defined as an undetectable HCV RNA at 12 weeks after the end of treatment not 24. -

Please add in the methods section the formula of calculation of APRI and FIB-4 scores with their references. - In the results section, under the subtitle of patients' characteristics, you reported that "after SVR among noninvasive measurements, median of LSM, FIB-4 and APRI increased significantly, except value of CEI"? I believe you mean the opposite? - In Table 1: Please add number of patients in each group.



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Minor comments: -Any abbreviation should be first mentioned in details then abbreviated there after. Please revise the abbreviations in the whole manuscript, as this was a repeated error. - There are some grammar mistakes, needs proper English editing. Thanks