

## ESPS PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**ESPS manuscript NO:** 18289

**Title:** Endocrine causes of nonalcoholic fatty liver disease

**Reviewer's code:** 03023823

**Reviewer's country:** Italy

**Science editor:** Jing Yu

**Date sent for review:** 2015-04-16 16:31

**Date reviewed:** 2015-04-21 19:32

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input checked="" type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
		BPG Search:	<input checked="" type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

## COMMENTS TO AUTHORS

The review is very long, sufficiently up to date. The approach should be readdressed. Probably we are dealing with co-morbidities, in which the association with some endocrine disease can facilitate steatogenesis or not. This is not addressed in most of the quoted references, so that it could be commented as a limitation. Differences between different types of fat storage, also in liver, due to diabetes or associated with lone obesity is not addressed. Microbiota is a very interesting topic, not well merged in the core argument of the review. This is not the only way to manage the nutritional issues in fatty liver mechanisms and – hopefully – treatment. The conclusion is not sufficiently supported “NAFLD, the most common chronic liver disease in Western countries, is intimately entangled with various endocrine diseases, sharing a key stone physiopathological mechanism being insulin resistance.” Overall, a greater focus and a better articulation with the lacking topics is needed before re-assessing this article.

## ESPS PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**ESPS manuscript NO:** 18289

**Title:** Endocrine causes of nonalcoholic fatty liver disease

**Reviewer's code:** 00058872

**Reviewer's country:** Italy

**Science editor:** Jing Yu

**Date sent for review:** 2015-04-16 16:31

**Date reviewed:** 2015-04-22 18:26

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
	<input type="checkbox"/> Grade D: Rejected	BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

## COMMENTS TO AUTHORS

Authors should be congratulated on their efforts to offer readers a scenario of the complex interaction between hormones and NAFLD. To further strenght the topic, this reviewer suggest several points, clearly evidenced in the following papers that should be emphasised. Authors are kindly requested to adhere to these suggestions , even though They are free to choice alternative references, dealing with the same content. Preliminary data on the relationship between circulating levels of Sirtuin 4, anthropometric and metabolic parameters in obese subjects according to growth hormone/insulin-like growth factor-1 status. Growth Horm IGF Res. 2015 Feb;25(1):28-33. Circulating levels of sirtuin 4, a potential marker of oxidative metabolism, related to coronary artery disease in obese patients suffering from NAFLD, with normal or slightly increased liver enzymes. Oxid Med Cell Longev. 2014;2014:920676. Endocrine changes (beyond diabetes) after bariatric surgery in adult life. J Endocrinol Invest. 2013 Apr;36(4):267-79. . Bisphenol A in polycystic ovary syndrome and its association with liver-spleen axis. Clin Endocrinol (Oxf). 2013 Mar;78(3):447-53. Are hepatic steatosis and carotid intima media thickness associated in obese patients with normal or slightly elevated gamma-glutamyl-transferase? J Transl Med. 2012 Mar 16;10:50. . Serum Bcl-2



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concentrations in overweight-obese subjects with nonalcoholic fatty liver disease. *World J Gastroenterol.* 2011 Dec 28;17(48):5280-8. Urinary excretion of 5-hydroxy-3-indoleacetic acid in dystimic/depressed, adult obese women: what correlations to hepatic steatosis? *Int J Immunopathol Pharmacol.* 2011 Jul-Sep;24(3):769-79. Liver-spleen axis, insulin-like growth factor-(IGF)-I axis and fat mass in overweight/obese females. *J Transl Med.* 2011 Aug 16;9:136. Hepatic steatosis, low-grade chronic inflammation and hormone/growth factor/adipokine imbalance. *World J Gastroenterol.* 2010 Oct 14;16(38):4773-83. Hepatic steatosis in overweight/obese females: new screening method for those at risk. *World J Gastroenterol.* 2009 Dec 7;15(45):5693-9.

## ESPS PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**ESPS manuscript NO:** 18289

**Title:** Endocrine causes of nonalcoholic fatty liver disease

**Reviewer's code:** 00071547

**Reviewer's country:** Italy

**Science editor:** Jing Yu

**Date sent for review:** 2015-04-16 16:31

**Date reviewed:** 2015-04-23 21:58

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input checked="" type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input type="checkbox"/> No	

## COMMENTS TO AUTHORS

please see attached my comments in pdf

## ESPS PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**ESPS manuscript NO:** 18289

**Title:** Endocrine causes of nonalcoholic fatty liver disease

**Reviewer's code:** 03023601

**Reviewer's country:** Sweden

**Science editor:** Jing Yu

**Date sent for review:** 2015-04-16 16:31

**Date reviewed:** 2015-05-01 00:57

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input checked="" type="checkbox"/> Grade D: Fair	<input checked="" type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
		BPG Search:	<input checked="" type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

## COMMENTS TO AUTHORS

Dear Authors, After a careful evaluation, I truly believe that your manuscript needs major revisions. My decision is based on several considerations: - the language is very poor and not adequate for a high scientific standard. -Most part of the manuscript was written without care, and most of the sentences are indeed very difficult to understand. -Many parts of the manuscript are defective in the quantity and the quality of the information given. It is not only the quality of the English used that is indeed very poor, but there are also many grammar and syntax errors, and that is unacceptable. The impression is that the manuscript was written in hurry, without taking a moment to think about what you were writing, and this is also unacceptable. There are also conceptual errors, one for all GLUT4 is not a receptor! Another simple suggestion: since you use several times "insulin resistance", please use the abbreviation IR. I really hope you will improve the overall quality of your manuscript. Best Regards

## ESPS PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**ESPS manuscript NO:** 18289

**Title:** Endocrine causes of nonalcoholic fatty liver disease

**Reviewer's code:** 00541330

**Reviewer's country:** Greece

**Science editor:** Jing Yu

**Date sent for review:** 2015-04-16 16:31

**Date reviewed:** 2015-05-03 01:16

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No	<input checked="" type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

## COMMENTS TO AUTHORS

**COMMENTS TO THE AUTHORS** This paper of Marino et al, entitled "Endocrine causes of NAFLD", reviews existing data for the association of NAFLD and endocrine diseases. Major comment: For a clearer and comprehensive analysis of the literature the following points are suggested: 1) Data about insulin resistance should be gathered in a separate section, rather than being scattered in the text 2) The authors have to choose to present data either by hormone categories or by endocrine diseases' categories (ex. Lonardo A et al. 'Endocrine NAFLD' a hormonocentric perspective of nonalcoholic fatty liver disease pathogenesis. J Hepatol 2006; 44: 1196) 3) A section about male hypogonadism should be added. Please report and discuss studies regarding the association of low testosterone, insulin resistance, metabolic syndrome and NAFLD. Minor comments: 1) I think that sections 2.1 to 2.5 and section 4 can be substantially reduced, in order to improve focusing on data concerning NAFLD and endocrine diseases. 2) Interesting reviews on insulin resistance that could be included: Stefan N et al. Endocr Rev 2008; 29: 939, Hocking S et al. Endocr Rev 2013; 34: 463 3) Page 6, section 2.2 Diagnosis, first paragraph: please delete "hepatocellular carcinoma". 4) Page 13, section 3.1 Type 2 diabetes, first paragraph: please delete

“recent” (it is a study published in 2009). 5) Page 20, section 3.5.1 PCOS: 1) 2nd paragraph: please specify “hallmarks of insulin resistance”, 2) 3rd paragraph: please delete “independently of obesity” 6) Page 21, section 3.5.1 PCOS: 1) 2nd paragraph: please name the mechanisms leading to decreased hepatic production of SHBG in PCOS, 2) 3rd paragraph: please specify the enzymes of androgen biosynthesis which are affected by increased serine phosphorylation, concerning enzyme activity. 7) Page 28, section 3.8.2 Hyperprolactinemia, first paragraph: please update literature on this topic (reference 198) 8) Page 29, section 3.9 Thyroid gland: please discuss the possible effect of hypothyroidism-related dyslipidemia on the association of overt hypothyroidism and NAFLD. 9) Page 30, section 3.10.1 Glucocorticoids, first paragraph: please replace “hypercorticism” with hypercortisolism. 10) Page 31, section 3.10.1 Glucocorticoids, 4th paragraph: 1) please delete “11-dehydrocorticosterone” and “active corticosterone”. Cortisol is the main glucocorticoid in humans while corticosterone is the main glucocorticoid in many other species. 11) Page 32, section 3.10.2 DHEA: please add the term DHEA-S in the section title and add brief information on dehydroepiandrosterone sulphate. 12) Page 35, section 4. Treatment: please replace “hypertension” with antihypertensive drugs. 13) Figure 1: Please add male hypogonadism – low testosterone levels 14) Figure 3: Please add the negative effect of insulin resistance and hyperandrogenism on SHBG levels 15) The paper needs to be edited for English.