

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 8040

Title: Controlled attenuation parameter for evaluating liver steatosis in chronic viral hepatitis

Reviewer code: 02441481

Science editor: Ma, Ya-Juan

Date sent for review: 2013-12-12 23:58

Date reviewed: 2013-12-18 01:18

| CLASSIFICATION | LANGUAGE EVALUATION | RECOMMENDATION | 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"/> Existed | <input checked="" type="checkbox"/> High priority for publication |
| <input type="checkbox"/> Grade C (Good) | <input type="checkbox"/> Grade C: a great deal of | <input type="checkbox"/> No records | <input type="checkbox"/> Rejection |
| <input type="checkbox"/> Grade D (Fair) | language polishing | BPG Search: | <input type="checkbox"/> Minor revision |
| <input type="checkbox"/> Grade E (Poor) | <input type="checkbox"/> Grade D: rejected | <input type="checkbox"/> Existed | <input type="checkbox"/> Major revision |
| | | <input type="checkbox"/> No records | |

COMMENTS TO AUTHORS

Dear Author, I found your manuscript well documented and interesting. The performance of methodology and the statistical analysis of your results are very well established. Your study is in agreement with previous ones that have shown the correlation of CAP with liver steatosis. I also believe that the development and standardized of CAP will be a useful tool in the future in detecting and measuring steatosis. Concerning the limitations of your study that you are mentioning, I have to agree with you that, CAP needs to be further validated in a larger number of patients with respect to the etiology of steatosis (viral hepatitis, non-alcoholic fatty liver disease), but your effort still remains reliable.

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 8040

Title: Controlled attenuation parameter for evaluating liver steatosis in chronic viral hepatitis

Reviewer code: 01323395

Science editor: Ma, Ya-Juan

Date sent for review: 2013-12-12 23:58

Date reviewed: 2014-01-10 01:30

| CLASSIFICATION | LANGUAGE EVALUATION | RECOMMENDATION | 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"/> Existed | <input type="checkbox"/> High priority for publication |
| <input type="checkbox"/> Grade C (Good) | <input type="checkbox"/> Grade C: a great deal of | <input type="checkbox"/> No records | |
| <input checked="" type="checkbox"/> Grade D (Fair) | language polishing | BPG Search: | <input checked="" type="checkbox"/> Rejection |
| <input type="checkbox"/> Grade E (Poor) | <input type="checkbox"/> Grade D: rejected | <input type="checkbox"/> Existed | <input type="checkbox"/> Minor revision |
| | | <input type="checkbox"/> No records | <input type="checkbox"/> Major revision |

COMMENTS TO AUTHORS

The study aimed to compare the sensitivity and specificity of CAP vs histology for the diagnosis of liver steatosis. The study is methodologically poor since more than half of patients were not steatotic at all. Therefore, the evaluation of the test is limited only to a restricted number of patients. As a consequence, calculations should be done only on subjects showing fat infiltration at histology. If patients were not obese, not diabetic, not dismetabolic, why they should have a fatty liver? In fact, most of them were free from fat infiltration. Also, while the introduction is focused on HCV infected patients, the study was conducted also on HBV and HIV co-infected subjects. No data on HCV genotype was reported. Moreover, waist circumference more than BMI is known to be related with liver fat infiltration; this parameter was missed. Finally, figures showing all the points representative of correlations are missing.

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 8040

Title: Controlled attenuation parameter for evaluating liver steatosis in chronic viral hepatitis

Reviewer code: 00184525

Science editor: Ma, Ya-Juan

Date sent for review: 2013-12-12 23:58

Date reviewed: 2014-01-20 06:24

| CLASSIFICATION | LANGUAGE EVALUATION | RECOMMENDATION | 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"/> Existed | <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"/> No records | <input type="checkbox"/> Rejection |
| <input type="checkbox"/> Grade D (Fair) | <input type="checkbox"/> Grade D: rejected | BPG Search: | <input type="checkbox"/> Minor revision |
| <input type="checkbox"/> Grade E (Poor) | | <input type="checkbox"/> Existed | <input type="checkbox"/> Major revision |
| | | <input type="checkbox"/> No records | |

COMMENTS TO AUTHORS

Ferraioli et al studied the usefulness of controlled attenuation parameter (CAP) in the assessment of steatosis in chronic viral hepatitis patients. They have shown that CAP has high sensitivity but relatively low specificity for the detection of hepatic steatosis in these patients. Major comments Core tip: The authors mention that CAP is correlated with the percentage of liver fat accumulation. However, the only scored steatosis by assessing its extent based on thirds of liver parenchyma and they did not make correlations using the exact percentage of steatotic hepatocytes by histology. This statement should change by replacing "percentage" with "extent". Introduction, 1st paragraph: Add data on the effect of liver steatosis in CHB. Methods: Patient selection (inclusion and exclusion) criteria for CHC and CHB should be included as well as HCV genotype data. The number of portal tracts, in addition to the length, per biopsy should be noted. Assessment of steatohepatitis and possible siderosis is needed. Results: Data on presence or absence of concurrent steatohepatitis (SH) should be added. It is known that up to 9% of CHC patients may have SH on biopsy. Also, the presence of siderosis may affect response to treatment. The authors should include details on the presence and extent of iron overload in the biopsies examined. Did SH or siderosis affect CAP performance to detect steatosis? Results should be adequately discussed. Discussion: On assessing steatosis CAP misclassified one third of the cases therefore it is difficult to support the notion that CAP could be a useful tool for the management of patients with chronic viral hepatitis. Minor comments Author contributions, last sentence: Do the authors mean "Liver Steatosis group" here? Abstract, methods: The last sentence should be omitted. Introduction, 2nd paragraph, 2nd sentence: Add references Methods, Liver biopsy and histology, 2nd paragraph: Replace "read" with "interpreted" Discussion, 1st paragraph: References on CAP as well as the influence of fibrosis in



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CAP measurements and comparison with ultrasound should be inserted here.