

## ESPS PEER REVIEW REPORT

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

**ESPS manuscript NO:** 10812

**Title:** Clinical Trial with TCM Intervention of “TTKESC” for CHBLF

**Reviewer code:** 00028550

**Science editor:** Ya-Juan Ma

**Date sent for review:** 2014-04-21 13:24

**Date reviewed:** 2014-05-22 23:27

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 type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<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"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

### COMMENTS TO AUTHORS

As discussed in Core tip section, the authors designed a randomized controlled clinical trial (RCT) to observe the effect of the TCM intervention of “tonifying the kidney to promote liver regeneration and repair by effecting stem cells and it’s microenvironment” (“TTKESC”) for treating chronic hepatitis B liver failure(CHBLF). They investigated the effect on mortality rate in three group with treatment of “TTKESC”. The results are promising among the three groups(16.67% vs 51.61%;16.67% vs 35.38%,respectively,P=0.010. More interestingly is the effect on the promotion of liver regeneration and repair. The study design is good and data collection and interpretation are sound. The statistical analyses were appropriate. Some concerns: 1) This reviewer is non-Chinese speaker and it is impossible to understand the ethics committee report. WJG is an international journal with global readership and the information should also be available in English to facilitate reproducibility by other investigators and to allow the reviewer to be able to evaluate the report independently. 2) Figure 2 is lacking appropriate statistical analysis such as standard of error on top of each blue column. 3) references are lacking appropriate citation to follow WJG format 4) The right column in each table is in Chinese which is ok but the authors need to add another column to translate the script which is also in the interest of the global readers and especially those who may be interested in repeating the study. 5) pictures are better than thousands of words. Liver regeneration and repair is a great finding in this manuscript. I suggest to include histology/pathology images to show liver repair.



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## ESPS PEER REVIEW REPORT

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

**ESPS manuscript NO:** 10812

**Title:** Clinical Trial with TCM Intervention of “TTKESC” for CHBLF

**Reviewer code:** 00009879

**Science editor:** Ya-Juan Ma

**Date sent for review:** 2014-04-21 13:24

**Date reviewed:** 2014-05-25 16:47

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"/> Existing	<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"/> No records	<input checked="" type="checkbox"/> Rejection
<input checked="" 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"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

### COMMENTS TO AUTHORS

Major points 1.You used mortality rate as primary efficacy end point. The cause of death should be specified. 2.The characteristic of patients should be described, such as ascites, encephalopathy, bilirubin, PT, platelet, HBV DNA, especillay the presence of cirrhotic change, etc. 3.Could you mention about the antiviral therapy guideline on which was your antiviral strategy basedn? To compare therapeutic effect of antivral therapy, formalization of antiviral therapy should be considered. 4. To rescue the patients, did you consider liver transplantation or artificial liver?



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## ESPS PEER REVIEW REPORT

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

**ESPS manuscript NO:** 10812

**Title:** Clinical Trial with TCM Intervention of “TTKESC” for CHBLF

**Reviewer code:** 00068723

**Science editor:** Ya-Juan Ma

**Date sent for review:** 2014-04-21 13:24

**Date reviewed:** 2014-05-26 07:34

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"/> Existing	<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"/> Rejection
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> Existing	<input checked="" type="checkbox"/> Minor revision
		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

### COMMENTS TO AUTHORS

This work is interesting that Chinese herbs increased survival of patients with liver failure. However, information on herbs is lacking. Some of the paragraphs of Discussion seemed appropriate for introduction. “Drugs and alcohol”, “CHBLF is a serious disease”, and “The new TCM formula of”. Were there any data regarding cumulative survival such as Kaplan-Meyer? Were there any adverse events with the herbs observed in the enrolled patients? The herbs in this trial seemed available in China. Were some of them available outside the country?