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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 3538

Title: The influence of chronic HBV infection on superimposed acute hepatitis E

Reviewer code: 00070481

Science editor: Song, Xiu-Xia

Date sent for review: 2013-05-06 10:36

Date reviewed: 2013-05-08 16:01

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input checked="" type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input checked="" 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 language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

These data of Patients were analysed carefully and hint useful points for treatment of HBV and HEV co-infection



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Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 3538

Title: The influence of chronic HBV infection on superimposed acute hepatitis E

Reviewer code: 00503536

Science editor: Song, Xiu-Xia

Date sent for review: 2013-05-06 10:36

Date reviewed: 2013-05-12 15:45

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"/> Existed	<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)	<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

The manuscript written by Dr. Cheng et al. describes the clinical features of patients with hepatitis E superimposed on chronic HBV infection. They found that patients with HBV+HEV superinfection had more complications, more likely to develop liver failure, and showed higher mortality rates than those with HEV infection alone. They also report that the disease severity of superimposed acute hepatitis E did not correlate to the HBV replication status, but to the presence of underlying liver cirrhosis. The data suggest that prognosis of patients with HBV+HEV superinfection mainly depends on the severity of underlying chronic liver disease caused by HBV infection rather than the liver damage caused by HEV infection. Administration of anti-HBV agents did not show any preferable effect on the patients' prognosis. These findings are interesting and important. However, there are some concerns that need to be addressed. Major points 1.HEV infection causes acute hepatitis, and most of the patients show high levels of serum ALT (over 1000 IU/L). The mean serum ALT levels in both groups in this study seem to be very low. At what timing, were those patients diagnosed as HEV infection? 2.The authors should clarify "complications" in detail. 3.MELD score is usually used for predicting the prognosis of patients with end-stage liver cirrhosis, but not of patients with acute liver injury. Therefore, it seems not to be suitable for the use of the score in patients analyzed in this study. 4.The authors divided the serum HBV DNA into just two categories, + or -. However, there should be a great variation in the levels of serum HBV DNA among patients with chronic HBV infection. Did the authors examine the relation between serum levels of HBV DNA and severity of liver injury or prognosis of the patients after superinfection with HEV?

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 3538

Title: The influence of chronic HBV infection on superimposed acute hepatitis E

Reviewer code: 00053556

Science editor: Song, Xiu-Xia

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Date reviewed: 2013-05-18 06:34

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 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 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

Comments to the Editor: Thanks for inviting me to review the paper entitled "The influence of chronic HBV infection on superimposed acute hepatitis E". Minor Comment: ? Major revision is required concerning language in term of grammar and structure. ? Language evaluation: "C".

Comments to the Authors: 1. TITLE reflects the major contents of the article. 2. ABSTRACT gives a clear delineation of the research background, including important data and conclusions; however, the following is better to be considered: ? More specification of both groups is required, for example: Group I; group of chronic hepatitis B superinfected with acute hepatitis E, Group II: acute hepatitis E. ? The details concerning statistical analysis have to be cancelled in this section. ? MELD scores: Model for End-stage Liver Disease, has to be fully written 3. INTRODUCTION ? Provides insufficient background regarding the studied topic: in order to satisfy the reader, it is better to cover the following points: o the usefulness of MELD scores (Model for End-stage Liver Disease) is needed to be elaborated o The issue of acute super/co-infection -on-chronic liver failure needs more clarification. ? The aim is clearly emphasized. 4. MATERIALS AND METHODS: Some important issues have to be considered. ? Criteria for chronic HBV infection need more specification as for how long HBsAg is positive. ? As real-time polymerase chain reaction was performed, level of HBV DNA is better to be evaluated in order to study the relationship between the level of HBV DNA in serum, the hepatic function impairments and prognosis of chronic hepatitis B superinfected with acute hepatitis E ? Calculations of MELD scores need more clarification denoting its value and significance. ? Statistical methods are appropriate. 5. RESULTS: ? Provide sufficient experimental data, however, the following items are better to be considered: ? Inappropriate subheadings 1 & 4: subheading one is concerning the demographic data rather than clinical characteristics of the studied

groups while subheading four is concerning the evaluation of influence of chronic status of HBV infection ? Subheadings 4: o line 5: The incidence of complications is better to be The occurrence of complications. Also, Complications need to be specified: ascites, peritonitis, hepatic encephalopathy, fulminate hepatitis, mortality, a longer period of the mean hospital stay,... o The serological status frequency of HBeAg (+) and anti-HBe (-), HBeAg (-) and anti-HBe (-), and HBeAg (-) and anti-HBe (+) are better to be covered. ? Subheadings 5: clarify the start of the course of treatment in relation to the development of HEV superinfection. ? Tables: o * is better to denote those with significant p value. o Titles of table one & two are poor and need to be informative o Table 2: values of MELD score are needed to be written in one row for more clarification. Also status of anti-HBe is missing, although it was mentioned in materials & methods and discussion sections.

6. DISCUSSION: An overall theoretical analysis of the study results is well covered. However, the following are advisable to be considered; ? Paragraph 2: It was mentioned that the disease severity of superimposed acute hepatitis E did not correlate to the HBV replication status (status of HBeAg and HBV-DNA), but to the underlying liver histological lesion (liver cirrhosis), however as mentioned in materials & methods section the diagnosis of underlying cirrhosis was made based on clinical, biochemical and ultrasonographical findings. This issue needs more clarification. ? Paragraph 4: It was mentioned that most patients in HBV+HEV group were HBeAb positive and had low level of HBV-DNA (data not shown in results section). ? Paragraph 5: It was mentioned that it was not common to use anti-HBV treatment in patients without liver failure. The statement needs more clarification. ? Precautions in orde