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Wan Chai, Hong Kong, China

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 6132

Title: Acute Hepatitis B of Genotype H Resulting in Persistent Infection

Reviewer code: 00012513

Science editor: Qi, Yuan

Date sent for review: 2013-10-03 22:49

Date reviewed: 2013-10-06 12:41

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 language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input checked="" 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"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

The manuscript submitted for publication by Yamada et al. is interesting considering a case of chronicity in a patient with HBV genotype infection H. The authors genotyped phylogenetically the circulating HBV by means the direct sequencing of the entire genome, detecting that the genotype is different from that obtained by a routine technique based on an EIA preS2 region epitope. The authors indicate the possibility that routine technologies are not to adequate for HBV genotyping and should be revised in the future. However,. In this sense the confirmation with an additional routine technology such as LiPA must be performed. It is indicated the possible association between genotype H (rare in Japan but maybe under-detected by methodological problems as they shown) and the risk of HBV chronicity. In this sense is extremely speculative to draw conclusions from a single case, although it is interesting that raise this possibility. The work is interesting but has important limitations mainly considering that only the genotype H may be the virologic characteristic associated with chronicity without analyzing with a minimum depth the possible presence of additional virological factors in significant propotions (just direct Sanger sequencing have been performed) in the absence of a clonal study to analyze possible factors as mutations in virologic preS X or Precore / core associated with the process that chronification, or even a evaluation of complexity of viral quasispecie. Without these data the argument about the possible association between genotype H and chronicity are very weak. On this last point it should be added to the discussion a depth analysis of the reported cases of cronifications and its possible association with viral genotypes. In the case there was observed this association it would give great strength to the conclusions of the study. The study clonal sequencing analysis could be accomplished by mass sequencing technology (Ex: 454 Roche or Ion Torrents, it would be much faster and the resolute



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than classical cloning. However the latter with a depth of 50 clones would be sufficient since it would allow frequencies in the order of 2-5% of potential minority variants. This analysis must be developed for consider the present study in terms of publication. Minors comments: It should be discussed the characteristics of HBsAg detection method used indicating that variants of the surface region is able to detect and compare with other methods such as more widespread Abbott Architect, Johnson Vitros ECI, Siemens Centaur and Elecsys / Cobas Roche. Indicating if the a determinant variant F134L detected in this case is possible to be detected by these other methods. The introduction is low informative and should include data on both virological and genetic factors which have been proposed as being associated with the process of chronicity.



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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 6132

Title: Acute Hepatitis B of Genotype H Resulting in Persistent Infection

Reviewer code: 00504486

Science editor: Qi, Yuan

Date sent for review: 2013-10-03 22:49

Date reviewed: 2013-10-12 09:22

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input checked="" type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input checked="" 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 authors reported that HBV genotype H strain from a patient is associated with acute hepatitis following establishment of persistent infection. They also suggested that SNP in the HLA-DP locus is a risk factor of chronic infection. Herein their writing is well organized so that we easily followed what they address. Their finding; HBV genotype H strain is relevant with acute hepatitis as seen other recent reports is worth for the publication of this journal. The finding is accumulating.



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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 6132

Title: Acute Hepatitis B of Genotype H Resulting in Persistent Infection

Reviewer code: 00006912

Science editor: Qi, Yuan

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Date reviewed: 2013-10-17 19:01

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

Dr. Yamada et al described a 47-year-old male with acute hepatitis B which was resulted from hepatitis B virus with genotype H and persisted infection for 26 months at least. Hepatitis B virus genotype H infection is rare in Asia. Therefore, the authors reported this case and claimed that the infection of HBV genotype H could be a risk factor for persistent infection. Acute hepatitis caused by hepatitis B virus with genotype H has been reported in Japan. In this case report, the authors emphasized that hepatitis B virus with genotype H could result in persistent infection. In this case, anti-viral agent was not prescribed for this patient when the patient had acute hepatitis. If anti-viral agents was given, would the clinical course be different?