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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

ESPS manuscript NO: 20166

Title: PAI-1 4G-4G and MTHFR 677TT in non-hepatitis C virus / hepatitis B virus related liver cirrhosis

Reviewer's code: 00182548

Reviewer's country: Romania

Science editor: Yue-Li Tian

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

The article is very interesting and useful for clinicians and researchers. The main demographic and clinical characteristics of patients presented in table 1 were not statistically analyzed. Are there some correlation between these data and the presence of thrombophilia markers? It would be ideal to estimate (noninvasive or invasive) the degree of liver fibrosis and compare it with thrombophilia markers, at least in future studies. If we want to estimate the risk of progression of liver fibrosis and those of thrombotic events we can look not only on thrombophilic genetic factors, but also to those acquired (deficiency of protein C, S, antithrombin III, increased serum levels of factor VIII, resistance to thrombomodulin action, etc). A complete analysis of the risk of progression of liver fibrosis in cirrhotic patients should include all thrombophilia factors (this could be a recommendation for the future). We must not forget that an independent risk factor for portal vein thrombosis is the reduction in portal venous blood velocity. There are some grammatical errors that must be corrected.