

7041 Koll Center Parkway, Suite 160, Pleasanton, CA 94566, USA **Telephone:** +1-925-399-1568 **E-mail:** bpgoffice@wjgnet.com https://www.wjgnet.com

## PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 66746

Title: A care cascade of recently acquired HCV infection among people living with HIV

at a university hospital in Taiwan

Reviewer's code: 03806663 Position: Editorial Board Academic degree: MD

**Professional title:** Professor

Reviewer's Country/Territory: Egypt
Author's Country/Territory: Taiwan

Manuscript submission date: 2021-04-05

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-04-05 17:03

Reviewer performed review: 2021-04-05 18:48

Review time: 1 Hour

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Language quality	[ ] Grade A: Priority publishing [ Y] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	[ ] Accept (High priority) [ ] Accept (General priority) [ Y] Minor revision [ ] Major revision [ ] Rejection
Re-review	[Y] Yes [] No
Peer-reviewer	Peer-Review: [Y] Anonymous [ ] Onymous
statements	Conflicts-of-Interest: [ ] Yes [ Y] No



7041 Koll Center Parkway, Suite 160, Pleasanton, CA 94566, USA **Telephone:** +1-925-399-1568 **E-mail:** bpgoffice@wjgnet.com https://www.wjgnet.com

## SPECIFIC COMMENTS TO AUTHORS

this article is intersting, but some comments are mentioned below: 1- can you mention the causes of increased hcv infection. 2- please mention the degree of freedom for each p value. 3- lanuage and grammer need polishing



7041 Koll Center Parkway, Suite 160, Pleasanton, CA 94566, USA **Telephone:** +1-925-399-1568 **E-mail:** bpgoffice@wjgnet.com https://www.wjgnet.com

## PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 66746

Title: A care cascade of recently acquired HCV infection among people living with HIV

at a university hospital in Taiwan

Reviewer's code: 04737423 Position: Peer Reviewer Academic degree: PhD

**Professional title:** Professor

Reviewer's Country/Territory: Poland

Author's Country/Territory: Taiwan

Manuscript submission date: 2021-04-05

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-04-06 15:24

Reviewer performed review: 2021-04-08 21:15

**Review time:** 2 Days and 5 Hours

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Language quality	[ ] Grade A: Priority publishing [ Y] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	[ ] Accept (High priority) [ ] Accept (General priority) [ ] Minor revision [ Y] Major revision [ ] Rejection
Re-review	[Y]Yes []No
Peer-reviewer	Peer-Review: [Y] Anonymous [ ] Onymous
statements	Conflicts-of-Interest: [ ] Yes [ Y] No



7041 Koll Center Parkway, Suite 160, Pleasanton, CA 94566, USA **Telephone:** +1-925-399-1568

E-mail: bpgoffice@wjgnet.com

https://www.wjgnet.com

## SPECIFIC COMMENTS TO AUTHORS

In the manuscript "A care cascade of recently acquired HCV infection among people living with HIV at a university hospital in Taiwan" the Authors investigated the care cascade of incident HCV infections among patients living with HIV, mainly MSM. The paper presents the results of the retrospective study based on data from medical records from years 2011-2018. The Authors made a comparison between IFN and DAA era. The manuscript is well-written and provides valuable data helpful in the expediting of the HCV micro elimination in HIV-infected patients in the Asia-Pacific Region. Following are some comments. The Core Tip should be reinforced to present the important findings of the analysis. The "Introduction" should be substantially shortened and the initial part of "Materials and methods" in the section "Study population and setting" should be placed in the "Introduction". According to Figure 1. the SVR achieved by patients treated with IFN was surprisingly high and reached 91.6% in the population including 37% of individuals infected with difficult-to-treat GT1a and 1b. Could you provide an explanation for so high efficacy? I suggest including in the manuscript the data on types of antiviral regimens used in patients treated with both IFN-based and IFN-free options. Please, correct the value of SVR in Table 2, it should be calculated concerning the number of treatment initiated instead of the number of patients positive for anti-HCV. All references, except 22 concerning HCV reinfections in HIV-infected patients, are appropriately selected and used.