

15 February 2016

Fang-Fang Ji,
Science Editor, Editorial Office
Baishideng Publishing Group Inc

Re: Manuscript NO.: 23985, Direct acting antiviral therapy is curative for chronic hepatitis C/autoimmune hepatitis overlap syndrome

Dear Dr. Ji:

We would like to thank you and the reviewers for the consideration of our manuscript entitled "Direct acting antiviral therapy is curative for chronic hepatitis C/autoimmune hepatitis overlap syndrome."

We are very appreciative of the time and effort taken by you and the reviewers to improve the quality of our manuscript. We have reviewed and revised our submission as advised.

Below are our responses to the reviewers:

A short running title of less than 6 words should be provided.

The following title has been provided: "Antiviral therapy cures HCV/autoimmune overlap syndrome."

Any article describing a study (basic research, clinical research, and case report) involving human and/or animal subjects is required to have the institutional review board (IRB) name, whether institutional (part of the author(s)' academic/medical institution, such as the Oak Grove Children's Hospital Institutional Review Board) or commercial/independent/private (contracted for-profit organizations, such as the ClinicCare Coalition for Human Rights Institutional Review Board), stated explicitly in the title page. In addition, a copy of any ethics approval document(s)/letter(s) or waiver should be provided to the BPG in PDF format.

The NYU IRB does not require IRB for case reports. Please find attached correspondence from the IRB attesting to this.

Any research article describing a study (clinical research and case report) involving humans should contain a statement in the title page clearly stating that all involved persons (subjects or legally authorized representative) gave their informed consent

(written or verbal, as appropriate) prior to study inclusion. In general, the BPG requires that any and all details that might disclose the identity of the subjects under study should be omitted or anonymized. In the rare situation that a study participant's identifiable information is crucial to the case presentation, the statement of informed consent is absolutely necessary, unless the participant is deceased. In addition, a copy of any approval document(s)/letter(s) or waiver should be provided to the BPG in PDF format.

Verbal consent was obtained from the 3 patients. No details that would permit identification of the subjects are included.

A conflict-of-interest statement is required for all article and study types. In the interests of transparency and helping reviewers to assess any potential bias in a study's design, interpretation of its results or presentation of its scientific/medical content, the BPG requires all authors of each paper to declare any conflicting interests (including but not limited to commercial, personal, political, intellectual, or religious interests) in the title page that are related to the work submitted for consideration of publication. In addition, reviewers are required to indicate any potential conflicting interests they might have related to any particular paper they are asked to review, and a copy of signed statement should be provided to the BPG in PDF format.

Samuel Sigal received research support from AbbVie and Gilead, consulting fees from AbbVie and Gilead, and was a member of the Gilead Speakers' Bureau. The authors have a conflict-of-interest to declare.

Please write a summary of no more than 100 words to present the core content of your manuscript, highlighting the most innovative and important findings and/or arguments. The purpose of the Core Tip is to attract readers' interest for reading the full version of your article and increasing the impact of your article in your field of study.

The following Core tip has been included:

"Autoimmune phenomena are common in patients with chronic hepatitis C, and occasionally patients with chronic hepatitis C have concomitant features of autoimmune hepatitis. Management of these patients has until recently been problematic due to the adverse effects of interferon on autoimmune processes and immunosuppression on viral replication. In this report we describe 3 patients with chronic hepatitis C/autoimmune hepatitis overlap syndrome who responded rapidly to direct acting anti-viral therapy with prompt normalization of liver tests and progressive decrease in the serologic markers of autoimmune hepatitis. The resolution of the autoimmune process supports a direct viral role in its pathophysiology."

Please offer the audio core tip:

An audio core tip has been recorded and attached.

Please put the reference numbers in square brackets in superscript. Please check across the text.

All reference numbers are in square brackets in superscript.

Please write the comments.

A Comments section has been included at the end of the manuscript.

Review comment:

We have included information about the response of the Total Protein and HCV viral load to the trial of budesonide for the first 2 patients.

The article has been submitted to iThenticate through CrossCheck.

We greatly appreciate the opportunity to address the reviewers' comments and make recommended revisions. We hope that it is now suitable for publication in the World Journal of Hepatology.

Sincerely,


Samuel Sigal, MD