Baishideng Publishing Group

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 Clinical Cases*

Manuscript NO: 80093

Title: Antibody and complement levels in patients with hypersplenism associated with cirrhotic portal hypertension and therapeutic principles

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03805961
Position: Peer Reviewer
Academic degree: MD
Professional title: Assistant Professor, Instructor, Lecturer
Reviewer's Country/Territory: Thailand
Author's Country/Territory: China

Manuscript submission date: 2022-09-16

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-09-17 07:53

Reviewer performed review: 2022-09-17 08:42

Review time: 1 Hour

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [ ] Grade C: Good [Y] Grade D: Fair [ ] Grade E: Do not publish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

Baishideng Publishing Group

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-reviewer statements	Peer-Review: [Y] Anonymous [ ] Onymous Conflicts-of-Interest: [ ] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Thank you for inviting me to review this article. Cirrhosis-associated hypersplenism really is an area that should be more investigated. Nonetheless, there are several comments about this manuscript. 1. The introduction is kind of irrelevant to the purpose of the study. And some errors appeared, which might be critical e.g., - the authors said that hypersplenism is often resulting from HBV infection: in fact, any causes of cirrhosis can cause hypersplenism, it depends on the degree of portal hypertension instead of the etiology. - Hepatitis B is an autoimmune disease <- HBV is NOT an autoimmune disease. - the authors mentioned only about HBV in an introduction part, but in fact, in the study, they included all causes of cirrhosis. Why mentioned about HBV only? - background knowledge of Ig subclasses is unnecessary for the study, makes it too lengthy for the introduction part. 2. What is the inclusion and exclusion criteria of the patients enrolled in the study?, this detail is lacking. 3. What is the definition of hypersplenism in this study? 4. what is the hypothesis of this study, I cannot get it from the manuscript. 5. How does the authors choose the control group? Is there any rationale to use this group of control patients? As far as I understand, selecting these hypersplenism group and control group does not help reflecting the effect of hypersplenism from cirrhosis. The inflammatory response in the study could be from any diseases with chronic inflammatory state, even cirrhosis alone without hypersplenism. While the control group is totally clinical irrelevant patients to compare with the study patients. 6 Results part should not be written in number or bullet items. Should be written as paragraphs for medical research original articles. Baseline characteristics of the patients in both groups is required and should be represented in table.

Baishideng Publishing Group

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 Clinical Cases*

Manuscript NO: 80093

Title: Antibody and complement levels in patients with hypersplenism associated with cirrhotic portal hypertension and therapeutic principles

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06391880
Position: Peer Reviewer
Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: India

Author's Country/Territory: China

Manuscript submission date: 2022-09-16

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-09-30 22:22

Reviewer performed review: 2022-10-04 13:42

Review time: 3 Days and 15 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) [Y] Accept (General priority) [ ] Minor revision [ ] Major revision [ ] Rejection
Re-review	[Y] Yes [ ] No

Baishideng Publishing Group

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-reviewer statements	Peer-Review: [Y] Anonymous [ ] Onymous Conflicts-of-Interest: [ ] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

The authors present a correlation between IgG, IgA, C3 and C4 levels with the different stages of hypersplenism associated with cirrhotic portal hypertension. It is a retrospective observational study and the data presented support the findings of increased levels of IgG and IgA paralleled by a decrease in the levels of C3 and C4 in the Child-Pugh classification. The data presented in the study suggests a correlation between the disease classification and the increased levels of antibodies with the decrease in complement levels suggesting that monitoring the levels of these biomarkers can be used to monitor therapy. Even Though the authors suggest that treatment with anti-hepatitis virus agents should be implemented, they do not show the data or literature supporting that. For the control group, the authors excluded data from patients with hypersplenism due to cirrhotic hypertension and included patients with other illnesses such as cholecystectomy. Hypersplenism can also be caused by Lymphoma, TB, Connective tissue and Inflammatory disease. It would have been great if the control group included patients with hypersplenism due to any of the above listed conditions to determine if the observed phenomena occurred because of hypersplenism due to cirrhotic hypertension or hypersplenism due to other causes.