

PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 81240

Title: Type 2 diabetes mellitus characteristics affect hepatocellular carcinoma development in chronic hepatitis B patients with cirrhosis

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 02731847

Position: Editorial Board

Academic degree: MD, MSc

Professional title: Associate Professor, Staff Physician

Reviewer's Country/Territory: Brazil

Author's Country/Territory: China

Manuscript submission date: 2022-10-31

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-10-31 17:17

Reviewer performed review: 2022-11-02 14:55

Review time: 1 Day and 21 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input checked="" type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No



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Peer-reviewer statements	Peer-Review: [<input checked="" type="checkbox"/>] Anonymous [<input type="checkbox"/>] Onymous
	Conflicts-of-Interest: [<input type="checkbox"/>] Yes [<input checked="" type="checkbox"/>] No

SPECIFIC COMMENTS TO AUTHORS

This is a very interesting paper. Nevertheless, this is a already highly discussed subject, and it adds little novelty to the literature. Methods are well done, and it is nicely written. I would suggest publication after a good language review - this is the major let down of this paper.

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Title: Type 2 diabetes mellitus characteristics affect hepatocellular carcinoma development in chronic hepatitis B patients with cirrhosis

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03261931

Position: Associate Editor

Academic degree: MD, PhD

Professional title: Director, Professor

Reviewer's Country/Territory: Taiwan

Author's Country/Territory: China

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Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
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SPECIFIC COMMENTS TO AUTHORS

Li et al. enrolled 412 CHB patients, including 196 patients with DM and the other 216 non-DM patients to assess the effect of DM on the risk of HCC. They found that DM, male, alcohol abuse, AFP >20 ng/mL and HBsAg >2.0 log IU/mL were risk factors for HCC development. DM duration of more than 5 years, diet control and insulin \pm sulphonylurea therapy significantly increased the risk of hepatocarcinogenesis. They concluded that DM greatly impacts the outcome of HBV. Several issues need to be addressed. Comments: 1. Were all the patients cirrhotic, as described in the materials and methods? If yes, please clarify it throughout the manuscript from title to conclusion. 2. How about the HbA1C levels of DM patients? The well vs. poor control of DM might have impacts on the HCC risk. 3. Did any DM patients receive metformin? A recent large-scale study showed that metformin use greatly reduced the risk of HCC development after HCV eradication [Tsai et al. J Hepatol. 2022 Oct 5:S0168-8278(22)03129-4. doi: 10.1016/j.jhep.2022.09.019. Epub ahead of print. PMID: 36208843.]. Please discuss it. 4. A recent study showed rGT levels were associated with risk of HCC among HBV patients on NUC therapy [Huang CF, et al. Liver Int. 2022 Jan;42(1):59-68.]. The authors reported the baseline rGT levels among the HBV patients, but did not take it into analysis for HCC risk. Please analyze and discuss it. 5. The preparation of NUC (TDF vs ETV) for HBV therapy might have different risks of HCC. How about the NUC used in this study? 6. DM is highly associated with fatty liver. However, fatty liver was significantly associated with lower cirrhosis and HCC risk in a previous study [Li J, et al. J Infect Dis. 2021 Jul 15;224(2):294-302.]. How about the data in this study? Please discuss it