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Flat C, 23/F., Lucky Plaza,
315-321 Lockhart Road,
Wan Chai, Hong Kong, China

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

Ms: 3275

Title: Green Tea Extract: A Potential Cause of Acute Liver Failure

Reviewer code: 02438659

Science editor: s.x.gou@wjgnet.com

Date sent for review: 2013-04-18 17:37

Date reviewed: 2013-04-18 22:25

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input checked="" type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS

COMMENTS TO AUTHORS:

Because of different concentrations of green tea extract, the green tea extract is not equal to gree tea. Thus the contents which may comprehend the hepatotoxicity attributable to green tea, should be clearly changed to blame the green tea extract.



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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

Ms: 3275

Title: Green Tea Extract: A Potential Cause of Acute Liver Failure

Reviewer code: 00158730

Science editor: s.x.gou@wjgnet.com

Date sent for review: 2013-04-18 17:37

Date reviewed: 2013-04-19 04:21

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input checked="" type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<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"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS

COMMENTS TO AUTHORS:

1. It would be helpful to make a table of the Laboratory studies including the follow-up labs. 2. Are any of the other herbals consumed associated with hepatotoxicity? Could the combination of these herbals be the cause of the liver failure or is it definitely only the green tea extract? May wish to acknowledge there is no definitive proof that green tea extract alone was the etiologic agent responsible for the liver failure



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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

Ms: 3275

Title: Green Tea Extract: A Potential Cause of Acute Liver Failure

Reviewer code: 00182114

Science editor: s.x.gou@wjgnet.com

Date sent for review: 2013-04-18 17:37

Date reviewed: 2013-04-19 15:14

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input checked="" type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS

COMMENTS TO AUTHORS:

To author This is a case report about acute liver failure due to green tea extract. This is very interesting case report. But I ask some questions. 1. According to your clinical data (P.6), abnormal datas are AST(2106 U/L),ALT (2984 U/L),CB (12.9MG/DL) ,UB (1.9 MG/DL) and INR 1.3. According to the criteria of acute liver failure, prothrombin time is prolonged by 4-6 seconds or more (especially INR>1.5). According to above



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data, I think that this case is not belong to acute liver failure. But this case is belong to acute liver injury. Would you please comment me the diagnosis of acute liver failure in this case.? 2. In page 6, the patient had a liver biopsy on hospital day 5. What kind of route do you perform liver biopsy., echo guide liver biopsy or transjugular route ? From my impression, most of liver failure are performed via the transjugular route due to coagulopathy. Please comment to me. 3. In the majority of acute liver failure there is widespread hepatocellular necrosis beginning in the centrizonal distribution and progressing towards portal tracts. Zone 1(periportal),Zone 2(midzonal) and Zone3(centrilobular) necrosis occur in acute liver failure. In page8, histological examination of the livers showed pathology characteristic of inflammatory infiltrates,cholestasis,steatosis and necrosis. Whate kinds of Zone is this case belong?



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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

Ms: 3275

Title: Green Tea Extract: A Potential Cause of Acute Liver Failure

Reviewer code: 00070897

Science editor: s.x.gou@wjgnet.com

Date sent for review: 2013-04-18 17:37

Date reviewed: 2013-04-22 12:55

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<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"/> No records	<input checked="" type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)		BPG Search:	<input type="checkbox"/> Minor revision
<input checked="" type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS

COMMENTS TO AUTHORS:

1. Before the onset of liver injury, this patient took Applied Nutrition? Green Tea Fat Burner, Whey protein, GNC Mega Men? Sport, and I Nopal (Cactus) at the same time, how to determine the liver damage is caused by the green tea extract, rather than the other substance?. 2. What is the composition of Applied Nutrition? Green Tea Fat Burner, in addition to the green tea extract, is there any other substances that may have hepatotoxicity? 3. Over the weight lose period, this patient lost 56 pounds. Rapid weight loss may create serious risks. The liver damage of this patient may be caused by rapid weight loss? 4. How the patient is treated?



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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

Ms: 3275

Title: Green Tea Extract: A Potential Cause of Acute Liver Failure

Reviewer code: 00054969

Science editor: s.x.gou@wjgnet.com

Date sent for review: 2013-04-18 17:37

Date reviewed: 2013-04-25 15:28

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input checked="" type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
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		<input type="checkbox"/> No records	

COMMENTS

COMMENTS TO AUTHORS:

Interesting case specially with the boom in use of herbal medicine for weight loss. There are 2 questions to the authors: 1. I note that the authors did not test for hepatitis E virus serology? (while tests were carried out for CMV, EBV and adenovirus). Is HEV an uncommon cause of acute liver injury in the USA? 2. Is the warning label on green tea extract suggested by US pharmacopeia mandatory or is it just a suggestion? a review article by Bunchorntavakul and K. R. Reddy on herbal and dietary supplement hepatotoxicity in alimentary pharmacology and therapeutics (Aliment Pharmacol Ther 2013; 37: 3 – 17) suggested otherwise.



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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

Ms: 3275

Title: Green Tea Extract: A Potential Cause of Acute Liver Failure

Reviewer code: 00503401

Science editor: s.x.gou@wjgnet.com

Date sent for review: 2013-04-18 17:37

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CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
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<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS

COMMENTS TO AUTHORS:

1. The attribution of an acute liver failure to green tee should be justified. Namely, prior to administration to the hospital the patient received four dietary supplements. Consequently, the possibility that the liver damage was caused by another substance cannot be excluded. 2. Consider a table depicting in details the patients laboratory parameters (on admission, during hospital stay, on discharge, post-hospitalization follow up). 3. Does the patient history remarkable only for obesity? Provide brief information about patients' occupation, family history and alcohol consumption. 4. Was markers of hepatitis E performed, if not, provide a comment 5. The total bilirubin level is 14.8 mg/dL. Was the jaundice evident only on face and sclera? 6. Describe liver physical examination 7. Provide radiology data (US/CT)