

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 5638

Title: Challenges in managing hepatitis C virus infection in cancer patients ID (02149073)

Reviewer code: 02453015

Science editor: Zhai, Huan-Huan

Date sent for review: 2013-09-18 14:30

Date reviewed: 2013-09-19 12:51

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
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

Major concerns: 1. Challenges need to be briefly listed in introduction. 2. A diagram or flow chart showing challenges in treatment of HCV at each stage of different cancers should be shown. 3. The take-home message seems not clear. The cost-effect, as well as benefit-adverse evaluation, ideally with solid data support, are needed.

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 5638

Title: Challenges in managing hepatitis C virus infection in cancer patients ID (02149073)

Reviewer code: 02449596

Science editor: Zhai, Huan-Huan

Date sent for review: 2013-09-18 14:30

Date reviewed: 2013-10-29 00:29

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

COMMENTS TO AUTHORS

The manuscript by Borchardt and Torres is a very interesting and well written review on management of HCV infected cancer patients. Minor comments: Page 5. Section entitled: Therapeutic challenges. Second paragraph. Authors report a SVR of 41% of HCV cancer patients, and classify this rate as a poor response auto-citing an abstract [13]. Since 41% of SVR in G1 pegIFN+RBV treatment, is not a rare rate, authors should clarify which patients did they studied (genotypes) and which therapeutic treatment was used. Page 5. Citation 14 refers to a review, and when possible, it is recommended to quote the original manuscript. Correct original citation is: Simmonds P, Bukh J, Combet C, Deleage G, Enomoto N, Feinstone S et al. Consensus proposals for a unified system of nomenclature of hepatitis C virus genotypes. Hepatology 2005 October;42(4):962-73. And the update on HCV classification should be: Donald B. Smith, Jens Bukh, Carla Kuiken, A. Scott Muerhoff, Charles M. Rice, Jack T. Stapleton and Peter Simmonds. Expanded classification of hepatitis C virus into 7 genotypes and 67 subtypes, updated criteria and assignment web resource. Hepatology 2013 Oct 1. doi: 10.1002/hep.26744. [Epub ahead of print] Table 1. Authors mention "Occurrence of occult infection" as the first difference between HCV infected cancer patients compared to those without cancer. Since occult infection has not been demonstrated for HCV, this sentence should be excluded.