

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 5587

Title: A randomized trial of iron depletion in patients with NAFLD and hyperferritinemia

Reviewer code: 00038192

Science editor: Zhai, Huan-Huan

Date sent for review: 2013-09-16 15:11

Date reviewed: 2013-09-23 19:17

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

please correct: Page 10, liver; Effect of treatment of liver enzymes Page 13, rate of improvement of liver damage improvement Page 6, thyroid Please show in a diagram individual steatosis grades, necroinflammation and hepatocellular ballooning of the 19 patients before and after finishing the study. The authors have to clearly indicate why this study was performed or indicate differences of this and their earlier study because similar findings have already been published by this group (Am J Gastroenterol. 2007 Jun;102(6):1251-8.)

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 5587

Title: A randomized trial of iron depletion in patients with NAFLD and hyperferritinemia

Reviewer code: 00159281

Science editor: Zhai, Huan-Huan

Date sent for review: 2013-09-16 15:11

Date reviewed: 2013-09-29 17:41

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

it is acceptable after minor revision as follow:

The authors compare iron depletion in patients with severe NAFLD and hyperferritinemia in 2 groups with doing phlebotomy (n=21) or lifestyle changes alone (n=17). The study is small and statistically underpowered.

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The authors compare iron depletion in patients with severe NAFLD and hyperferritinemia in 2 groups with doing phlebotomy (n=21) or lifestyle changes alone (n=17). The study is small and statistically underpowered.

These are my comments:

- 1: The aim in abstract is Unclear. Please use the sentences clearer than before.
2. In abstract specify the number of men and women.
3. Given the number of patients after 2 years were excluded during Follow up:
Please specify how many patients in each group (cases and controls) after 2 years of assessment remained.
4. In materials and methods: please specify: How to use statistical analysis to determine the results?
For Example: where you have used the Wilcoxon test and t-test?
5. Due to the low number of patients in the 2 groups were compared, is better using of Fisher's exact test than chi-square.
6. Please specify confounding factors in the study. Why did you use of logistic regression in your study?

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 5587

Title: A randomized trial of iron depletion in patients with NAFLD and hyperferritinemia

Reviewer code: 00002726

Science editor: Zhai, Huan-Huan

Date sent for review: 2013-09-16 15:11

Date reviewed: 2013-09-30 08:47

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

COMMENTS TO AUTHORS

The study examines the treatment of NAFLD patients with phlebotomy. This treatment modality has been examined in a number of other studies with variable results. There are several concerns with the present study that compromise its significance. Specific comments 1. A NAS as low as 1 does not qualify as "severe NAFLD" as the authors state in the Methods. 2. Because there is a high rate of spontaneous improvement in NAS of 1 point, the accepted endpoint for clinical trials is an improvement in NAS of 2 points with no worsening of fibrosis. The data should be reinterpreted by that criteria. 3. Under the study design in this paper a patient with a NAS of 1 based on mild steatosis alone who had resolution of the steatosis would be a treatment success. 4. The study is underpowered with only 19 patients completing the study. There was no statistical difference in the intention to treat analysis.