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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 5863

Title: Chronic HCV infection and atherosclerosis: clinical impact and mechanisms.

Reviewer code: 00742516

Science editor: Gou, Su-Xin

Date sent for review: 2013-09-29 14:17

Date reviewed: 2013-10-10 19:34

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 checked="" 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 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

I read the paper with great interest. We are doing a observational study on this topic. The manuscript is generally well written. There are a few trivial slips in the manuscript. Abstract Paragraph 2: "However, it clear that HCV..." should add an "is". Introduction Paragraph 2: "The possible role of an infectious agent in the development of experimental atherosclerosis in rodents was first more then 120 years ago" need a verb and "then" should be "than". Paragraph 2: "However, recent data showed an excess of cardiovascular mortality in the course of chronic HCV infection". The font color should be black. Table 1: "Fukui M, [2003]" may delete "[]". Tabel 2, 3: the font size should be the same.



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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 5863

Title: Chronic HCV infection and atherosclerosis: clinical impact and mechanisms.

Reviewer code: 00417596

Science editor: Gou, Su-Xin

Date sent for review: 2013-09-29 14:17

Date reviewed: 2013-10-12 04:43

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 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 checked="" 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

Adinolfi et al present a very interesting review of 1) how HCV may cause atherosclerosis and 2) the potential clinical impact (cardiovascular and neurological) of HCV-related atherosclerosis. The article is organized to 1) describe known associations between HCV and atherosclerosis, then 2) look at data on the impact of HCV-associated atherosclerosis on cardiac disease and stroke. The authors helpfully point out that the studies on this topic (relationship between HCV and atherosclerosis) vary widely in the number of patients enrolled, followup duration, and study location (which affects genotype). The main purpose of the article is to raise awareness regarding the existing data that suggests HCV may accelerate atherosclerosis, and to underscore the need for “meta-analytic reviews and adequate prospective studies...to gauge the impact of HCV on the development of atherosclerosis more precisely”. The authors point out that more detailed understanding of the mechanism driving HCV - related atherogenesis would enable development of novel therapeutics to prevent this atherogenesis. While this may be true, one might argue that strong proof of HCV-accelerated atherogenesis is also urgent because it might actually alter general public health approaches to HCV screening and treatment. Specifically, if HCV-accelerated coronary artery disease (CAD) and stroke (CVAs) can be proven definitively, there would be further impetus for 1) more widespread HCV screening / diagnostic efforts and 2) initiation of earlier treatment. In a climate where the cost-benefit ratio of HCV screening is often debated, concrete evidence of accelerated CAD and CVAs due to HCV would favor more aggressive screening and might lead to significant patient benefit. This point should be discussed. Otherwise, I think that Adinolfi et al present an extremely useful summary of the existing data relating HCV to atherosclerosis, and highlighting the major importance of now probing this relation with better, large-scale, well controlled studies to better



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define the impact of HCV on cardiovascular and cerebrovascular outcomes. I favor publication of this article after it has been edited thoroughly for English grammar corrections.