

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 12131

Title: New treatments for chronic hepatitis C: a guide for paediatricians

Reviewer code: 02527647

Science editor: Ya-Juan Ma

Date sent for review: 2013-12-04 17:26

Date reviewed: 2014-01-21 22:55

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"/> Existing	<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	<input type="checkbox"/> Existing	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No records	<input checked="" type="checkbox"/> Major revision

COMMENTS TO AUTHORS

In this review, the authors described traditional and new drugs in the treatment for chronic HCV. The title named "a guide for paediatricians", actually, cause there are too little evidences of HCV treatment in children, the authors talked too little about the use of new drugs in children. So, the title and contents is not consistence and too far from guide. In the efficacy of PEG-IFN plus ribavirin regimen treatment part, the references is too limited, just talk about viral genotypes and EVR, as we known, the 4 weeks viral response and IL-28B SNP are also very important for SVR.

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 12131

Title: New treatments for chronic hepatitis C: a guide for paediatricians

Reviewer code: 02861184

Science editor: Ya-Juan Ma

Date sent for review: 2013-12-04 17:26

Date reviewed: 2014-01-22 20:44

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"/> Existing	<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"/> Existing	<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

Thank you for this very interesting paper. In fact, in view of the huge amount of new therapies available in the very new future (sofosbuvir has granted FDA and also EMA authorization few days ago and Daclatsvir is already on EMA process) pediatricians should be advised on the changes in the approach to HCV treatment in order to correctly manage their young patients. However, a general section on HCV in pediatric patients i.e. burden of HCV in this peculiar setting of patients and prognosis are warranted. Moreover, I suggest to enclose a general description of the virological categories (RVR, EVR) and their role as stopping rule. Their high predictive role in obtaining eradication is the results of an impressive number of paper in adults HCV patients and are a precise guide for clinicians to met utility rule and avoid side effects and reduce the costs. Please, state more in detail about the safety profile and side effects as well as the significant drug-drug interaction related to telaprevir and Boceprevir. A brief suggestions about the management of side effects as well as the role of counselling with the parents is suggested.

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 12131

Title: New treatments for chronic hepatitis C: a guide for paediatricians

Reviewer code: 01136482

Science editor: Ya-Juan Ma

Date sent for review: 2013-12-04 17:26

Date reviewed: 2014-02-12 07:54

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"/> Existing	<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"/> Existing	<input checked="" type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

1. Please report in a new paragraph, the role of liver biopsy in paediatric HCV patients, for the diagnosis and to provide the antiviral treatment. 2. Report also in another paragraph the host factors that can influence the SVR (e.i. insulin resistance, obesity, liver steatosis, IL-28B, etc). 3. The recent NASPGHAN practice guidelines on the diagnosis and management of HCV infection in infants, children, and adolescents is not cited and reported in the text (J Pediatr Gastroenterol Nutr. 2012 Jun;54(6):838-55).

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 12131

Title: New treatments for chronic hepatitis C: a guide for paediatricians

Reviewer code: 02438786

Science editor: Ya-Juan Ma

Date sent for review: 2013-12-04 17:26

Date reviewed: 2014-02-13 13:17

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Y] Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Y] Grade B: Minor language polishing	<input type="checkbox"/> Existing	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Y] 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"/> Existing	<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 review discusses emerging therapies for the treatment of hepatitis C. As there are no studies available in the pediatric population, the review depends upon the adult studies with possible implications for the pediatric population. I think it is important for the pediatric gastroenterologists and hepatologists to keep in touch with the emerging therapies and the the paradigm shift in the treatment of hepatitis C. Few comments Page 4. "Early viral response (EVR), defined as undetectable plasma HCV RNA 12 weeks after the end of treatment". It is not clear that authors want to mention early virological response 12 weeks after starting treatment (EVR) or end of treatment response (ETR)? Page 7: "A recent clinical trial showed that 100% of previously untreated genotype 2 and 3 patients achieved SVR with sofosbuvir plus ribavirin regimen [23]." In fact responses are no so good for genotype 3 in all studies. Recommended duration of therapy for this genotype is 24 weeks, longer than genotype 1. In The Valence study presented at AASLD 2013, 24 week therapy of sofosbuvir with ribavirin resulted only in 60% SVR in treatment experienced cirrhotic patients with genotype 3

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 12131

Title: New treatments for chronic hepatitis C: a guide for paediatricians

Reviewer code: 01714111

Science editor: Ya-Juan Ma

Date sent for review: 2013-12-04 17:26

Date reviewed: 2014-02-16 20:52

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"/> Existing	<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 checked="" 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"/> Existing	<input checked="" type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

This review is interesting and the subject is very hot, since there are a lot of new drugs and new future protocol. However there are 2 problems: 1.This study is a bit superficial regarding the new drugs (post PI drugs) and the new protocols. 2. The pediatric point of view is missing, although there is a problem since such new drugs are naturally tried in adults, however i would expect a little more regarding the potential and danger of such drugs in children