

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 5167

Title: Factors Correlating with Acoustic Radiation Force Impulse Elastography in Chronic Hepatitis C

Reviewer code: 00012386

Science editor: Wen, Ling-Ling

Date sent for review: 2013-08-20 15:55

Date reviewed: 2013-08-25 10:37

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input checked="" 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 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 TO AUTHORS

Nishikawa et al. reported the utilities of acoustic radiation force impulse (ARFI) elastography for evaluation of hepatic fibrosis in patients with chronic hepatitis C. This paper looks very important and has a novelty in this study field. Comments 1. In Discussion section, 7th paragraph, "Fibrosis stage.....", please change to capital. 2. If possible, include "APRI" in Discussion section.

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Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 5167

Title: Factors Correlating with Acoustic Radiation Force Impulse Elastography in Chronic Hepatitis C

Reviewer code: 00047453

Science editor: Wen, Ling-Ling

Date sent for review: 2013-08-20 15:55

Date reviewed: 2013-09-02 06:33

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Y] Accept
<input type="checkbox"/> Y] Grade B (Very good)	<input type="checkbox"/> Y] 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	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	language polishing	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 TO AUTHORS

Significant progress has been made over the last decade on the noninvasive assessment of liver fibrosis in patients with viral hepatitis, none of them being perfect. This methods have reduced the need for liver biopsy. Transient elastography, FibroTest and APRI are amongst the most widely used with adequate validation. More recently ARFI has been introduced as an interesting alternative modality. This interesting study deals with factors influencing ARFI elastography measurements in patients with hepatitis C. This paper introduces important results on this imaging method. Congratulations. Comments 1. I miss in the introduction and in the discussion a few words for the clinician, on the importance of assessing liver fibrosis (by any means) which is associated with prognosis and to identifying patients requiring antiviral treatment. Also on the different current noninvasive forms to assess liver fibrosis other than liver biopsy and their performance. 2. How many different examiners participated in ARFI measurements, and what has been the interobserver reproducibility in your group?. 3. In page 10, second paragraph: it says:.....ARFI tended to be higher than in genotype 1..... It should say:ARFI tended to be higher in genotype 1..