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ESPS Peer-review Report
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ESPS Manuscript NO: 5651
Title: Prognostic Value of M30/M65 for Outcome in HBV Related Acute-on-Chronic Liver Failure
Reviewer code: 00182114
Science editor: Zhai, Huan-Huan
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CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[ ] Grade A (Excellent)	[Y] Grade A: Priority Publishing	Google Search:	[ ] Accept
[ ] Grade B (Very good)	[ ] Grade B: minor language polishing	[ ] Existed	[Y] High priority for publication
[Y] Grade C (Good)	[ ] Grade C: a great deal of language polishing	[ ] No records	
[ ] Grade D (Fair)		BPG Search:	[ ]Rejection
[ ] Grade E (Poor)	[ ] Grade D: rejected	[ ] Existed	[ ] Minor revision
		[ ] No records	[ ] Major revision

COMMENTS TO AUTHORS

Dear author This is the first report in HBV related ACLF that the M30/M65 ratio has prognostic value for predicting ACLF patient clinical outcomes at 3 month survival period. It is very interesting paper. I ask authors some question. 1. Page 8. For ACLF patients, female (13/81) 16.05% and male (68/81) 83.95%. Male patients developed HBV related ACLF more frequently than female patients in Chinese population. Please explain why male is dominant for ACLF. 2. Page 13. Hepatocyte apoptosis predominates at earlier stages of disease; while as disease staging progresses there is a gradual switch to necrosis, and eventually necrosis predominates in the late stage of liver disease. The ratio of apoptosis vs, necrosis found in control group samples was 54% vs.46%. However, in CHB this ratio changed to 46% vs.54%. It finally reached 33% vs.67% in ACLF. Please explain the estimate of parameter of histological apoptosis and necrosis. 3. Authors conclude that M30/M65 ratio is most suitable prognostic factor compare to MELD and Child-Pugh. Please explain why M30/M65 ratio has prognostic value for predicting ACLF patients compared to conventional parameter of MELD and Child-Pugh.