

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 12450

Title: Vitamin D Supplementation in addition to Peg-Interferon-alpha and Ribavirin in Null-Responders Patients with Genotype 1 or 4 Chronic Viral Hepatitis C: ANRS HC25 VITAVIC study

Reviewer code: 02462702

Science editor: Ya-Juan Ma

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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 checked="" 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 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

This study attempted to answer an important clinical question. Major comments: 1. However the design was a major problem here as they chose an open-label, uncontrolled study of superiority design of small sample size (40), but in fact only 29 subjects were analyzable for the primary end point. This limitation should be adequately addressed in the Discussion section. 2. I could not find the reference or justification of the sample size estimation: why EVR rate of 21% with vitamin D in comparison to a hypothesized EVR rate of 7% in the absence of vitamin D? EVR of 21% is really a very ambitious estimation in cohort of null responders. 3. Why a weekly dosing of Vit D was chosen? Why not daily dose? 4. Please discuss the impact of direct acting antiviral (DAA) in relation to vit D deficiency.