

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 14869

Title: Model for predicting hepatitis B e antigen seroconversion to interferon- α in chronic hepatitis B patients

Reviewer's code: 00053556

Reviewer's country: Egypt

Science editor: Ya-Juan Ma

Date sent for review: 2014-10-29 19:00

Date reviewed: 2014-11-13 03:59

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	PubMed Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input checked="" type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
	<input type="checkbox"/> Grade D: Rejected	BPG Search:	<input checked="" type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

Comments to the Editor: Thanks for inviting me to review the review article entitled "Model to predict response to interferon- α in HBeAg-positive chronic hepatitis B patient". Minor Comment: ? Major revision is required concerning language in term of grammar and structure. ? Language evaluation: "C". 1. TITLE Reflect the major content of the article. 2. ABSTRACT It gives a clear delineation of the research background, including important data and conclusions 3. INTRODUCTION Provides sufficient background regarding the studied topic and the aim is clearly emphasized. However, the authors have to carefully revise the following: o First paragraph: Refs 1-4 (2004-2007) are better to be updated. o The authors are advised to add other predictors like LHBs. Zhu et al, (2013) found that on-treatment quantification of serum LHBs is a useful parameter for predicting VR in patients on peginterferon alfa-2a. Combining LHBs, HBsAg and HBV DNA can predict VR and SR more effectively and earlier. 4. MATERIALS AND METHODS: The section is well covered. Statistical methods used are appropriate. However, some important data are incomplete and have to be fulfilled: o HBV genotyping: Test used, Country of origin o Serum HBsAg, Anti-HBs,

HBeAg, Anti-HBe, and Anti-HBc were tested using commercially available kits (Abbott Laboratories): Test used, Country of origin have to be added. 5. RESULTS: o Provide sufficient experimental data and subheadings are well maintained. o Clinical characteristics: "By the end of treatment, 47 patients (32%) experienced HBeAg seroconversion and those patients had lower HBeAg than those without HBeAg seroconversion (2.55 ± 0.07 vs. 2.30 ± 0.13 , $P = 0.016$)". This is not comparable to figures in table (1) and has to be revised. It is (2.30 ± 0.13 vs. 2.67 ± 0.07) o Title of Table 1: Is not informative and need to be revised o Figure S1: Different numbering is given! Better to unify the way of numbering figures. o Tables S1-S2: Negative and positive predictive values were missing. Anyhow, both tables are better to be deleted and only clarify their content within the related paragraphs. 6. DISCUSSION: o An overall theoretical analysis of the study results is not well covered. Some data were discussed without being clarified within the result section. o Recommendation and conclusion were clearly identified. 7. References: Relevant and sufficient updated references, especially the most current literatures were cited (14/32 references were cited from publications ≥ 2009). o The journal style for writing this section is well maintained, o Reference No1-4 are better to be updated

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

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Title: Model for predicting hepatitis B e antigen seroconversion to interferon- α in chronic hepatitis B patients

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	PubMed Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input checked="" type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
	<input type="checkbox"/> Grade D: Rejected	BPG Search:	<input checked="" type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

In this study, Wang et al. have developed scoring systems which can be used for predicting HBeAg seroconversion after IFN- α treatment. The models demonstrated high negative and positive predictive values and will benefit the patients who are undergone anti-HBV therapy. There are several limitations in the study design and data analysis. 1. In this study, "HBeAg seroconversion was defined as the loss of HBeAg (≤ 1 S/CO; Abbott Laboratories, Abbott Park, IL, USA) and positive Anti-HBe (≤ 1 S/CO, Abbott Laboratories) at 52 weeks". Why Anti-HBe should be ≤ 1 S/CO? Usually, the loss of HBeAg is companied by the appearance of Anti-HBe, but in some patients, the HBeAg-/anti-HBe- or HBeAg+/anti-HBe+ can exist for a long time, especially in those who are infected with pre-C stop codon mutants. The authors need to specify in the ms that among the 47 patients who were classified in the HBeAg seroconversion group, how many were HBeAg-/anti-HBe-. 2. Patients with missing data at week 52 were classified as non-responders at the end of treatment. This is not a proper way for data analysis. 3. The title "Model to predict response to interferon- α in HBeAg-positive chronic hepatitis B patients" does not properly reflect the major



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content of the ms. Indeed, response to interferon- α should include loss of HBeAg and reduction of HBV-DNA level. But in this study, the authors only observed the HBeAg seroconversion. 4. The English language of this ms needs extensive editing.

ESPS PEER-REVIEW REPORT

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	PubMed 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"/> The same title	<input type="checkbox"/> High priority for publication
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		[Y] No	

COMMENTS TO AUTHORS

1. Minor (professional) language revision would be appreciated. 2. Full information on origin of all lab. tests used should be provided. 3. Discrepancy in baseline levels of HBeAg between responders and nonresponders between text and Table 1 should be corrected. 4. In Tables S1-2 provide data on PPV and NPV. Data/comments on NPV and PPV should be included in Results section. 5. Table S3A-C and Figure S1 could be removed. Table and Figure are very "busy" with much data provided and not commented in text. Presentation is not very informative.