

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 12019

Title: Factors associated with significant liver fibrosis assessed using transient elastography in general population.

Reviewer code: 00070261

Science editor: Yuan Qi

Date sent for review: 2014-06-17 21:18

Date reviewed: 2014-06-20 19:58

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

COMMENTS TO AUTHORS

The authors investigated the prevalence and predictors of liver fibrosis assessed by noninvasive elastography in Korean general population. The paper is well-written, the tables and figures are of good quality, and the references are appropriate and up-to-date. I think this study will give us useful information regarding optimal selection of patients who require follow-up for chronic liver disease.

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 12019

Title: Factors associated with significant liver fibrosis assessed using transient elastography in general population.

Reviewer code: 00043980

Science editor: Yuan Qi

Date sent for review: 2014-06-17 21:18

Date reviewed: 2014-07-08 09:20

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"/> [] 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	BPG Search:	<input type="checkbox"/> [] Minor revision
<input type="checkbox"/> [] Grade E: Poor		<input type="checkbox"/> [] Existing	<input type="checkbox"/> [] Major revision
		<input type="checkbox"/> [] No records	

COMMENTS TO AUTHORS

We have carefully examined this new manuscript. Briefly, this is a cross-sectional study investigating the prevalence of suspected liver fibrosis as assessed by transient elastography (TE) and by various potential predictors of liver fibrosis in an asymptomatic general Korean population. The authors have clearly outlined an aim for this study in the introduction. The discussion highlights the experiment's findings and the potential implications for medical practice. In our major comments: The major limitation of this study is the lack of histological confirmation of liver fibrosis, as is mentioned in the discussion. The study's definition of a liver stiffness value of > 7 kPa on TE as significant liver fibrosis is arbitrary and based on a study which also lacked appropriate histological comparison. The clinical limitations of the authors' present results must therefore be made quite clear. In minor comments, there are a few grammatical errors: Page 3, Line 9: First write out abbreviation of LS as 'liver stiffness' before using abbreviation. Page 6, Line 22-3: Change sentence to "Imaging studies included fat CT and carotid sonography." Page 6, line 27: First write out abbreviation of CAP as 'controlled attenuation parameter' before using abbreviation.