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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 19883

Title: Long term lamivudine treatment of patients with chronic hepatitis B and cirrhosis:
A real-life cohort study

Reviewer's code: 02591901

Reviewer's country: Italy

Science editor: Jin-Lei Wang

Date sent for review: 2015-05-25 09:05

Date reviewed: 2015-06-10 12:01

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

COMMENTS TO AUTHORS

This manuscript is very interesting,it can be accepted after some minor revisions about the language.



ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 19883

Title: Long term lamivudine treatment of patients with chronic hepatitis B and cirrhosis: A real-life cohort study

Reviewer’s code: 02458901

Reviewer’s country: Cameroon

Science editor: Jin-Lei Wang

Date sent for review: 2015-05-25 09:05

Date reviewed: 2015-06-21 11:06

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

COMMENTS TO AUTHORS

The research is well designed, and the manuscript is good. In this study, the authors investigated the real-life clinical outcomes of CHB and LC patients after lamivudine treatment under whole-course management. This retrospective-prospective cohort study based on two nonrandom cohorts of Chinese patients. The authors found that the incidence of HCC in CHB at baseline of LAM were lower than that of the control group, and the incidence of HCC in LC at baseline of LAM were lower than that of the control group. Viral breakthrough and relapse were inevitable during Long term LAM treatment, the maximum effort to enable HBV-DNA in undetectable level and keep the ALT levels normalization in CHB/LC patients under whole -course management can reduce the incidence rates of LC and HCC. 1 The manuscript need to be proofed by a native english speaker. 2 Some data seems missing, please check it. Such as It has been demonstrated that amelioration of liver necroinflammation or cirrhosis could be achieved with antiviral therapy by inhibition of viral replication. []?, 3.1 Baseline Characteristics: The data distribution scatter diagram was drawing before and after matching, while showed balanced after matching (P= ??) (fig.1 and fig.2). 3.4



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CHB/LC study endpoints: Of 51 (??%) LC patients in LAM group and 48 (??%) in history control group at baseline, which (5, 9.8%) vs. (12, 25%) progressed to HCC ($p=$). Furthermore, there were 1 (2.0%) patient dead in LAM group vs. 3 (6.25%) in history control group ($P=??$); and also, some references in the discussion are missing. 3. Please check the references list, and make a update.