



BAISHIDENG PUBLISHING GROUP INC

8226 Regency Drive, Pleasanton, CA 94588, USA

Telephone: +1-925-223-8242

Fax: +1-925-223-8243

E-mail: bpgoffice@wjgnet.com

http://www.wjgnet.com

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 12032

Title: CHRONIC HEPATITIS C GENOTYPE 1 TREATMENT ROADMAP FOR RESOURCE CONSTRAINED SETTINGS

Reviewer code: 02937519

Science editor: Yuan Qi

Date sent for review: 2014-06-19 09:13

Date reviewed: 2014-06-22 10:02

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 type="checkbox"/> Grade B: Very good	<input 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	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

Dr. Lim SG described the road map for antiviral therapy to HCV genotype 1 patients. This study is review article. As the author pointed out, direct acting antivirals (DAAs) present substantial advance in efficacy with better tolerability, though they are very expensive. Although telaprevir and boceprevir are not already recommended in AASLD and this study does not have new information, the road map is required in a poor country.

1. As the treatment period tended to be longer in treatment without DAAs than with DAAs, there were patients who discontinued the treatment. In addition, the frequency of adverse events in treatment with telaprevir and boceprevir were very high. Therefore, the author should describe about the adverse events and adherence.
2. For new generation of DAAs, the devices which do not make tolerance variation in HCV are required. I think the author has to comment about tolerance variation in HCV.
3. The 4-week PR read-in was very important for the road map. It is a demerit that a treatment period becomes four weeks long. How does the author consider this demerit?



BAISHIDENG PUBLISHING GROUP INC

8226 Regency Drive, Pleasanton, CA 94588, USA

Telephone: +1-925-223-8242

Fax: +1-925-223-8243

E-mail: bpgoffice@wjgnet.com

http://www.wjgnet.com

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 12032

Title: CHRONIC HEPATITIS C GENOTYPE 1 TREATMENT ROADMAP FOR RESOURCE CONSTRAINED SETTINGS

Reviewer code: 02943043

Science editor: Yuan Qi

Date sent for review: 2014-06-19 09:13

Date reviewed: 2014-06-23 09:43

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

COMMENTS TO AUTHORS

Outlining a treatment roadmap for resource constrained settings is a important initiative. However, the lack of a definition for what is considered a "resource constrained" setting is the major flaw of this study. Roadmaps outline treatment algorithms which include the use of regular quantitative HCV RNA measurements and DAAs. Are these available in truly resource constrained settings? A clear definition of what is considered a resource constrained setting and the actual resources available in these locations is required. There is limited data on the use of IFNL3 genotyping prior to therapy in order to guide treatment selection. There is no data on African patients which comprise a large population from "resource constrained" regions. They have poorer treatment outcomes. There is no clear indication on the exclusion / inclusion criteria of RCTs selected for the study or a summary of the actual studies used for the analysis.



BAISHIDENG PUBLISHING GROUP INC

8226 Regency Drive, Pleasanton, CA 94588, USA

Telephone: +1-925-223-8242

Fax: +1-925-223-8243

E-mail: bpgoffice@wjgnet.com

http://www.wjgnet.com

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 12032

Title: CHRONIC HEPATITIS C GENOTYPE 1 TREATMENT ROADMAP FOR RESOURCE CONSTRAINED SETTINGS

Reviewer code: 02943058

Science editor: Yuan Qi

Date sent for review: 2014-06-19 09:13

Date reviewed: 2014-07-07 10:50

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 work is very interesting, although don't indicate the importance of the CC/TT IL28B determination clearly, don't forget that many countries to lead its treatments based mainly in the use of the INF/RBV alone, without DAA, and in this cases the knowledge of IL28B genotype is primordial. To revise the figure 1B and 2A, and the text where are cited, some percentages don't matched. To revise some repeated words and with missing letters. I suggest this job for publication, later to make these changes.