

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 12499

Title: Chronic hepatitis-B in children with or without malignancies: A 13-year follow-up

Reviewer code: 00183339

Science editor: Ya-Juan Ma

Date sent for review: 2014-07-17 09:46

Date reviewed: 2014-07-20 14:08

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input checked="" 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

This manuscript deals with "Chronic hepatitis-B in children with or without malignancies". The manuscript is well presented and of interest. I found no problems with it. I think it is the first time that this work has been done and can contribute to increase the knowledge of this topic. All parts of the manuscript are well organized, and valuable conclusions are provided.

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 12499

Title: Chronic hepatitis-B in children with or without malignancies: A 13-year follow-up

Reviewer code: 00012216

Science editor: Ya-Juan Ma

Date sent for review: 2014-07-17 09:46

Date reviewed: 2014-07-26 18:37

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

COMMENTS TO AUTHORS

GENERAL COMMENTS (1) In the manuscript: "Chronic hepatitis-B in children with or without malignancies: A 13-year follow-up", Usta M et al carry-out a retrospective case-control study about HBV-infection outcome in paediatric patients according to previous exposure to oncologic treatment. They find a lower HBeAg seroconversion on patients treated with chemotherapy. (2) The interest of the paper is relevant since these data could suggest that chemotherapy could affect HBV-specific immune response conducting to a lower chance to obtain either natural or treatment-induced HBeAg seroconversion. (3) Presentation of the manuscript is adequate. (4) Ethics of the research:

SPECIFIC COMMENTS Title: Appropriate Abstract: the authors state that the rate of seroconversion after anti-HBV treatment is significantly lower on patients previously treated with chemotherapy, but the p value shown is 0.06. They should review this figure, and in case it is not a mistake they should say that a tendency was observed not reaching statistical significance. Also, in the abstract's conclusion, authors state that the clinical course was milder than in adult patients, but in the study they do not compare paediatric and HBV data from adults. Introduction: it is adequate to centre the subject Material and methods: Authors should indicate the sampling method used in the case-control study. It looks like they include HBV patients diagnosed before 2000 and they followed them up to 2013 by consecutive sampling, but it is not clearly explained. To know the chemotherapy regimens used could be interesting, because they can produce different grades of immunosuppression (i.e

rituximab, regimens containing prednisone and so on). Authors should also state if the study protocol was accepted by the Local Ethics Committee. Results: Authors should review p value for treatment induced HBe seroconversion. They state that they found a significant difference between both study groups but they communicate a 0.06 p value. Also, they should review the Kaplan-Meier curve (Fig 4) because the control curve reaches 0% value, but according to the serconversion rate showed, this curve should reach 40%, because serconversion was observed in 60% of cases in the control group. Discussion: maybe should be shorten and perhaps authors should stress the importance of the immunosuppressive condition of chemotherapy that could impair adaptive immune response and be the cause of the different serconversion rate. Also authors should comment that a possible bias of the study is that the moment of infection is not known and it could be longer in the control group, which could also explain the different serconversion rate.

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 12499

Title: Chronic hepatitis-B in children with or without malignancies: A 13-year follow-up

Reviewer code: 00013175

Science editor: Ya-Juan Ma

Date sent for review: 2014-07-17 09:46

Date reviewed: 2014-07-29 12:11

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 checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<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"/> 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

The authors, Usta M, et al., reported an outcome of chronic hepatitis B (CHB) in children with or without malignancies after a 13-year follow up. They concluded that the rate of HBeAg/anti-HBe seroconversion was significantly lower in patients recovered from malignancies than patients with CHB without malignancies. However, the duration of HBV infection seems to be different among the patients with or without malignancies. The patients with malignancies seem to be infected with HBV during the therapy against malignancies, probably due to blood transfusion or blood products. On the other hand, the patients without malignancies included maternally infected patients. Therefore, the differences in the duration of HBV infection might affect the rate of seroconversion. Moreover, the duration of lamivudine therapy was not shown. The durations of lamivudine therapy must affect the seroconversion of HBeAg/anti-HBe. The authors should indicate them.