

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 12098

Title: Hepatitis B reactivation and Timing for Prophylaxis

Reviewer code: 00225318

Science editor: Ya-Juan Ma

Date sent for review: 2014-06-22 17:43

Date reviewed: 2014-06-22 21:56

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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"/> 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

The letter of Nazan Tuna et al. about the article "Hepatitis B surface antigen seroconversion after HBV reactivation in non-Hodgkin's lymphoma", recently reported by Liu WP et al (World J Gastroenterol. 2014;20(17):5165-7) includes adequate comments that improve the interesting and useful paper of Liu et al.

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 12098

Title: Hepatitis B reactivation and Timing for Prophylaxis

Reviewer code: 00036463

Science editor: Ya-Juan Ma

Date sent for review: 2014-06-22 17:43

Date reviewed: 2014-06-25 06:14

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

COMMENTS TO AUTHORS

This letter to the editor entitled "Hepatitis B reactivation and Timing for Prophylaxis" by Nazan Tuna et al. raises the important issue that has yet to be determined in preventive measures for HBV reactivation. As the authors indicate, the duration of continued pre-emptive antiviral therapy after cessation of chemotherapy in Liu's report seems to be short. Given the Rituximab-based regimen used for the patient case, longer duration of antivirals post-chemotherapy might be more beneficial to reduce the risk of antivirals-withdrawal reactivation. Thus, it is relevant for the authors (Liu et al.) to respond this comment raised by Tuna et al. However, the other issue that Tuna et al. pointed out seems to be arbitrary. There is no specifications on "antiviral initiation 2-3 weeks before chemotherapy" in the current guidelines (AASLD, EASL, etc.). Based on most of the relevant data (even with Rituximab), it is less likely that reactivation occurs within such a short period following chemotherapy.

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 12098

Title: Hepatitis B reactivation and Timing for Prophylaxis

Reviewer code: 00012216

Science editor: Ya-Juan Ma

Date sent for review: 2014-06-22 17:43

Date reviewed: 2014-06-30 03:45

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" 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 type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

Nazan and Karabay writes a letter to make some comments about a clinical report entitled Hepatitis B surface antigen seroconversion in non-Hodgkin's lymphoma. The authors' major comments are that the prophylactic treatment should have been started before rituximab and that the treatment should have been extended at least for 6 months instead of 4 months according to EASL guidelines. Nevertheless, the authors of the clinical report already commented in the discussion about this issue. They cited the guidelines from EASL, AASLD and Asian-Pacific guidelines, to show that this is a controversial issue. Nevertheless, there is a general consensus recommending at least to continue prophylaxis for 6 months after stopping chemotherapy and in strong immunosuppressive regimes the duration should be for 12 months after chemotherapy. Probably Nazan and Karabay are right and authors should have highlighted this point. The English should be reviewed to make easier to read.

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 12098

Title: Hepatitis B reactivation and Timing for Prophylaxis

Reviewer code: 02528327

Science editor: Ya-Juan Ma

Date sent for review: 2014-06-22 17:43

Date reviewed: 2014-07-07 16:28

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	<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

Letter in response to the publication Liu W-P et al. 2014. World J Gastroenterol 20:5165-70 The letter of the authors N. Tuna & O. Karabay adds an interesting aspect to the case report "Liu et al. 2014, Hepatitis B surface antigen seroconversion after HBV reactivation in non-Hodgkin's lymphoma". The outcome may have been different if lamivudine had been administered before the commencement date of the immunochemotherapy with rituximab. The letter should be published, the authors of the original publication (Liu et al.) should have the opportunity to respond, and the response published with the letter.