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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology
ESPS manuscript NO: 30585
Title: Optimizing hepatitis C virus treatment through pharmacist interventions: Identification and management of drug-drug interactions
Reviewer's code: 03662581
Reviewer's country: United States
Science editor: Jing Yu
Date sent for review: 2016-10-24 08:48
Date reviewed: 2016-11-07 12:30

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
[Y] Grade A: Excellent	[ ] Grade A: Priority publishing	Google Search:	[Y] Accept
[ ] Grade B: Very good	[Y] Grade B: Minor language polishing	[ ] The same title	[ ] High priority for publication
[ ] Grade C: Good	[ ] Grade C: A great deal of language polishing	[ ] Duplicate publication	[ ] Rejection
[ ] Grade D: Fair	[ ] Grade D: Rejected	[ ] Plagiarism	[ ] Minor revision
[ ] Grade E: Poor		[Y] No	[ ] Major revision
		BPG Search:	
		[ ] The same title	
		[ ] Duplicate publication	
		[ ] Plagiarism	
		[Y] No	

COMMENTS TO AUTHORS

Great work, just some minor edits especially with spacing. My only question was with Table 4. I could not figure out how affected portion of the study cohort was calculated.

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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology
ESPS manuscript NO: 30585
Title: Optimizing hepatitis C virus treatment through pharmacist interventions: Identification and management of drug-drug interactions
Reviewer's code: 00068093
Reviewer's country: Turkey
Science editor: Jing Yu
Date sent for review: 2016-10-24 08:48
Date reviewed: 2016-12-26 02:31

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
[ ] Grade A: Excellent	[Y] Grade A: Priority publishing	Google Search:	[Y] Accept
[Y] Grade B: Very good	[ ] Grade B: Minor language polishing	[ ] The same title	[ ] High priority for publication
[ ] Grade C: Good	[ ] Grade C: A great deal of language polishing	[ ] Duplicate publication	[ ] Rejection
[ ] Grade D: Fair	[ ] Grade D: Rejected	[ ] Plagiarism	[ ] Minor revision
[ ] Grade E: Poor		[Y] No	[ ] Major revision
		BPG Search:	
		[ ] The same title	
		[ ] Duplicate publication	
		[ ] Plagiarism	
		[Y] No	

COMMENTS TO AUTHORS

Drug-drug interactions continue to be a considerable challenge for managing patients with HCV treatment. In this study the authors assessed the frequency and pharmacological category of identified drug-drug-interactions in real-world patients with HCV. This study suggests an interdisciplinary approach for managing DDIs.In my opinion, publication will be valuable.

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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology
ESPS manuscript NO: 30585
Title: Optimizing hepatitis C virus treatment through pharmacist interventions: Identification and management of drug-drug interactions
Reviewer's code: 00003361
Reviewer's country: United States
Science editor: Jing Yu
Date sent for review: 2016-10-24 08:48
Date reviewed: 2017-01-03 04:29

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
[ ] Grade A: Excellent	[Y] Grade A: Priority publishing	Google Search:	[ ] Accept
[Y] Grade B: Very good	[ ] Grade B: Minor language polishing	[ ] The same title	[ ] High priority for publication
[ ] Grade C: Good	[ ] Grade C: A great deal of language polishing	[ ] Duplicate publication	[ ] Rejection
[ ] Grade D: Fair	[ ] Grade D: Rejected	[ ] Plagiarism	[Y] Minor revision
[ ] Grade E: Poor		[Y] No	[ ] Major revision
		BPG Search:	
		[ ] The same title	
		[ ] Duplicate publication	
		[ ] Plagiarism	
		[Y] No	

COMMENTS TO AUTHORS

Drug-drug interactions (DDIs) are common with current direct acting antiviral (DAA) medications for hepatitis C; however, the extent to which these are encountered in routine practice has not been well described. This is a retrospective review of the work accomplished by a clinical pharmacist in reviewing patients prescribed DDA in a single academic medical practice. Overall, 664 patients were prescribed DDA, in whom 5,217 medications were reviewed (7.86 medications per patient) and 781 interactions identified. Interestingly, pharmacists required on average 30 minutes for each patient review for patients taking the regimen with the most potential DDIs. The most common DDIs with each regimen and the recommendations for addressing these were listed. These data emphasize the potential importance and time required for evaluating for DDIs in patients with hepatitis C. Specific comments: 1. The following sentence in the abstract is not clear and should be revised: "This retrospective analysis reviewed the work completed by the clinical pharmacist in order to measure the aims identified for the study;" i.e., please clearly state the aims of the study. 2. Patients with more advanced cirrhosis (Child B or C) are at risk for liver failure if prescribed DAA regimens that

include NS3/4 inhibitors. How often did the pharmacist have concerns for the stage of cirrhosis and whether the DAA regimen recommended should not include the NS3/4 drug?