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## PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

Manuscript NO: 73772

Title: Prognostic non-invasive biomarkers for all-cause mortality in non-alcoholic fatty

liver disease (NAFLD): A systematic review and meta-analysis

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03475142

**Position:** Peer Reviewer

Academic degree: MD, PhD

Professional title: Assistant Professor

Reviewer's Country/Territory: Japan

Author's Country/Territory: United Kingdom

Manuscript submission date: 2021-12-09

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-12-10 16:26

Reviewer performed review: 2021-12-22 16:49

Review time: 12 Days

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [ ] Grade C: Good [ Y] Grade D: Fair [ ] Grade E: Do not publish
Language quality	<ul> <li>[ ] Grade A: Priority publishing [Y] Grade B: Minor language polishing</li> <li>[ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection</li> </ul>
Conclusion	<ul> <li>[ ] Accept (High priority) [ ] Accept (General priority)</li> <li>[ Y] Minor revision [ ] Major revision [ ] Rejection</li> </ul>
Re-review	[Y]Yes []No



# Baishideng **Publishing**

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Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous
statements	Conflicts-of-Interest: [ ] Yes [Y] No

### SPECIFIC COMMENTS TO AUTHORS

The manuscript was reviewed for publication in the journal. The review manuscript was designed to evaluate available evidence on the use of non-invasive test(s) as prognostic factors for mortality in NAFLD. It is the reviewer's opinion that the review is interesting and that the manuscript is easy to follow. However, it appears that there are a couple of concerns in the manuscript. 1) The authors evaluated available evidence on the use of non-invasive test(s) as prognostic factors for mortality in NAFLD in the study. Non-invasive test(s) such as NFS, FIB4, BARD, and APRI appears to be useful to predict liver fibrosis. Therefore, the use of these tests as prognostic factors for mortality in NAFLD may be incomprehensible. The authors should discuss the issue. 2) The authors discussed the prognostic markers for mortality in NAFLD, but not NASH. How about the definition of NAFLD? NASH may be more prognostic state for mortality. The authors should explain the point. 3) The non-invasive scoring system that performed best at predicting all-cause mortality was NFS [pHR 3.07], followed by FIB4 [pHR 3.06]. pHR of NFS and FIB4 appeared to be almost similar. How about forest plots for pHR for FIB4 and all-cause mortality? The authors should explain the point. 4) There are a couple of mistakes. Key points: in second sentence, NAFD FIB4 in abstract vs FIB-4 in manuscript? Abstract: in section of Background and Aims, the use of-non-invasive test



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Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

Reviewer's code: 04737606

**Position:** Editorial Board

Academic degree: DSc, MD, PhD

**Professional title:** Professor

Reviewer's Country/Territory: Ukraine

Author's Country/Territory: United Kingdom

Manuscript submission date: 2021-12-09

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-12-27 15:31

Reviewer performed review: 2022-01-02 15:57

Review time: 6 Days

Scientific quality	[ ] Grade A: Excellent [Y] Grade B: Very good [ ] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Language quality	[Y] Grade A: Priority publishing [] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	<ul> <li>[ ] Accept (High priority) [Y] Accept (General priority)</li> <li>[ ] Minor revision [ ] Major revision [ ] Rejection</li> </ul>
Re-review	[ ]Yes [Y]No



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Peer-reviewer	Peer-Review: [ ] Anonymous [Y] Onymous
statements	Conflicts-of-Interest: [ ] Yes [Y] No

#### SPECIFIC COMMENTS TO AUTHORS

Current review sums up data regarding the important question in hepatology. It is well designed and argumentative. It would be beneficial if the authors will concretize possible difference in the role of the discussed laboratory parameters and scoring systems in patients with different stages of NAFLD steatosis, steatohepatitis, liver fibrosis and cirrhosis associated with fatty liver