

PEER-REVIEW REPORT

Name of journal: *World Journal of Hepatology*

Manuscript NO: 78461

Title: PROGRESSIVE CHANGES IN PLATELET COUNTS AND FIB-4 SCORES PRECEDE THE DIAGNOSIS OF ADVANCED FIBROSIS IN NASH PATIENTS

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05911905

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: United States

Manuscript submission date: 2022-06-27

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-07-04 01:08

Reviewer performed review: 2022-07-11 00:55

Review time: 6 Days and 23 Hours

| | |
|--------------------|---|
| Scientific quality | <input checked="" type="radio"/> Grade A: Excellent <input type="radio"/> Grade B: Very good <input type="radio"/> Grade C: Good <input type="radio"/> Grade D: Fair <input type="radio"/> Grade E: Do not publish |
| Language quality | <input checked="" type="radio"/> Grade A: Priority publishing <input type="radio"/> Grade B: Minor language polishing <input type="radio"/> Grade C: A great deal of language polishing <input type="radio"/> Grade D: Rejection |
| Conclusion | <input type="radio"/> Accept (High priority) <input type="radio"/> Accept (General priority) <input checked="" type="radio"/> Minor revision <input type="radio"/> Major revision <input type="radio"/> Rejection |
| Re-review | <input checked="" type="radio"/> Yes <input type="radio"/> No |

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|-------------------------------------|---|
| Peer-reviewer statements | Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous |
| | Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

SPECIFIC COMMENTS TO AUTHORS

In the retrospective study, Dr. Fimmel and his colleagues reported that the progressive changes of the PLT counts and FIB-4 scores precede the diagnosis of advanced fibrosis in patients with NASH. Overall, it is a high-quality study, with a well-written manuscript. Some minor comments:

1. The format and structure of the section of Result. Authors illustrated their data in a way totally different from most other manuscripts, with the detail description of each table and figure. The reviewer suggest author to revise the result and divide the section by subheadings, which can highlight the main findings, and make the section more readable and structurally organized. Some of the context on the Result section can be moved to Fig Legends.
2. For Fig1 ,pls add “ liver biopsy score 4’ on the left of the upper panel, and “ MRE score 6.1’ to the lower panel (or similar labels) to clearly indicate each panel. Similar revision is also needed for Fig 3. and Fig4.

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Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05208113

Position: Editorial Board

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Professional title: Assistant Professor, Lecturer

Reviewer's Country/Territory: China

Author's Country/Territory: United States

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|--------------------|---|
| Scientific quality | <input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish |
| Language quality | <input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection |
| Conclusion | <input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection |
| Re-review | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |



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**Peer-reviewer
statements**

Peer-Review: ☒ Anonymous ☐ Onymous

Conflicts-of-Interest: ☐ Yes ☒ No

SPECIFIC COMMENTS TO AUTHORS

As early detection of liver fibrosis represents an important goal of clinical care, the authors aim to predict the occurrence of cirrhosis in NASH patients. They found that time-dependent changes in platelet counts and Fib-4 scores contribute to the prediction of cirrhosis in NASH patients with biopsy- or MRE-staged fibrosis. Their incorporation into predictive algorithms may assist in the earlier identification of high-risk patients. It's better to validate the algorithms using clinical samples.