

PEER-REVIEW REPORT

Name of journal: *World Journal of Hepatology*

Manuscript NO: 83540

Title: Noninvasive Biomarkers in Pediatric Nonalcoholic Fatty Liver Disease

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05775440

Position: Peer Reviewer

Academic degree: PhD

Professional title: Associate Research Scientist

Reviewer's Country/Territory: China

Author's Country/Territory: United States

Manuscript submission date: 2023-01-29

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-01-30 01:57

Reviewer performed review: 2023-02-09 08:43

Review time: 10 Days and 6 Hours

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 Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation

Scientific significance of the conclusion in this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
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
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

The manuscript is well written and comprehensive, which is useful for us to understand the current research of noninvasive Biomarkers in Pediatric NAFLD.

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Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05446956

Position: Peer Reviewer

Academic degree: MD

Professional title: Professor

Reviewer's Country/Territory: Turkey

Author's Country/Territory: United States

Manuscript submission date: 2023-01-29

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-02-10 05:43

Reviewer performed review: 2023-02-20 13:20

Review time: 10 Days and 7 Hours

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
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
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SPECIFIC COMMENTS TO AUTHORS

Authors extensively reviewed diagnostic performance of serological and imaging biomarkers for evaluation of NAFLD and NASH in children. My comment: • The term “imaging biomarkers” cause confusion with “serological biomarkers”. Therefore, I suggest author to use non-invasive tests (NIT) that is generally excepted term in literature; serology-based NIT vs. imaging-based NIT. • Subtitles and text of “Imaging Biomarkers” section should be rearranged, and also extensively redacted, such as: A. Ultrasound based NIT a. Steatosis (attenuation parameter (CAP)) b. Fibrosis (Transient Elastography (TE) / Vibration Controlled Transient Elastography (VCTE) / Acoustic radiation force impulse (ARFI)) B. MRI based NIT a. Steatosis (Proton Density Fat Fraction (MRI-PDFF)) b. Fibrosis (Magnetic Resonance Elastography (MRE)) • APRI and FIB4 are index/scores developed for evaluating degree of fibrosis rather than differentiating NAFL from NASH. Therefore, the data for APRI and FIB4 at Table 7 should be either excluded or moved to Table 8. Similarly, TE is used for evaluating fibrosis rather than steatosis, so sentences at Page 30, Line 22-23: “MRI-PDFF appears to be superior to TE...” and at Page 31, Line 4-5: “.... elastography with fat quantification.”

must be corrected accordingly. • Some minor typological error should be corrected, i.e. Page 10, Line 19: “(50% and 24\$ in patients...”; Page 14, Line 20-21: F2 should be added to “histologic categories: F0 (no fibrosis), F1 (portal fibrosis with no septae), ...”; “ng/mL” rather than “ng/ml”, missing units of leptin, etc.