

ESPS Peer-review Report
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Title: JUVENILE AUTOIMMUNE HEPATITIS: SPECTRUM OF THE DISEASE

Reviewer code: 00186426

Science editor: Huan-Huan Zhai

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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 checked="" type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<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)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

Comments to the review entitled "Juvenile autoimmune hepatitis: spectrum of the disease" from Maggiore G et al. General comments: The authors present an extensive revision about juvenile autoimmune hepatitis. The paper is comprehensive and well written. However, the authors should describe an important form of autoimmune hepatitis, now in the era of liver transplantation, the "de-novo autoimmune hepatitis after pediatric liver transplantation". This a particular type of unexplained late graft dysfunction that occurs in association with serology and histology features that are compatible with autoimmune hepatitis in a patient who did not suffer from autoimmune hepatitis or any other autoimmune disease before the liver transplantation. This special type of graft dysfunction has been reported in children and adults and its recognition is important, because prompt appropriate treatment can prevent liver graft loss and the need of retransplantation. Some references about this form of autoimmune hepatitis, and the pathophysiological aspects of this disease should be included to enrich the manuscript: 1. GIBELLI NE, TANNURI U, MELLO ES, et al. Successful treatment of de novo autoimmune hepatitis and cirrhosis after pediatric liver transplantation. *Pediatr Transplant* 2006;10:371-6 2. KERKAR N, HADZIC N, DAVIES ET, et al. De-novo autoimmune hepatitis after liver transplantation. *Lancet* 1998: 351:409-413 3. PETZ W, SONZOGNI A, BERTANI A, et al. A cause of late graft dysfunction after pediatric liver transplantation: de novo auto immune hepatitis. *Transplant Proceed* 2002: 34: 1958-1959 4. HANEGAN MA, PORTMANN BC, NORRIS SM, et al. Graft dysfunction mimicking autoimmune hepatitis following liver transplantation in adults. *Hepatology* 2001: 36: 464-470 5. MIELI-VERGANI G, VERGANI D. De-novo autoimmune hepatitis after liver transplantation. *J Hepatol* 2004 : 40 : 3-7 In



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conclusion, the authors should add these comments to increase the consistency of the paper! Uenis Tannuri, Head Professor and Chief University of S?o Paulo Medical School Pediatric Surgery and Liver Transplantation Unit Sao Paulo, Brazil