



**ESPS PEER REVIEW REPORT**

**Name of journal:** World Journal of Hepatology

**ESPS manuscript NO:** 13251

**Title:** ANTIVIRAL TREATMENT FOR CHRONIC HEPATITIS B IN RENAL TRANSPLANT PATIENTS

**Reviewer code:** 00504341

**Science editor:** Fang-Fang Ji

**Date sent for review:** 2014-08-14 15:02

**Date reviewed:** 2014-09-10 14:20

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<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 checked="" type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

**COMMENTS TO AUTHORS**

The diagnosis, prognosis, treatment and evolution of hepatitis B in renal transplant patients are frequently studied in the last decades. Publications with detailed analysis of the action of new drugs are also the subject of frequent updates. As well, meta-analysis including large numbers of patients searching to establish the significance of hepatitis B as risk factor in-patient and graft survival is currently performed. The analysis conducted by E: Ridruejo also appropriately inform about all clinic and therapeutic aspects this topic mentioned in the current literature. Nevertheless, regarding the value of HBsAg in serum compared to seronegative HBsAg, as an independent significant risk factor for patient and renal graft survival. the authors mainly mention that pooling of study results demonstrated that HBsAg in serum when compared to seronegative was an independent and significant risk factor for death and graft failure after renal grafting. As well, the author mentioned that these results have been updated in 2014: involving 82 690 recipients. The summary of the meta-analyses of Fabrizi et al, support the notion that untreated HBsAg positive patients after renal transplant have an increased risk of mortality and graft loss. Concerning this subject, could be of interest in this manuscript to include the publication of Reddy PN: Impact of pre-existing hepatitis B infection on the outcomes of kidney transplant recipients in the United States. (Clin J Am Soc Nephrol. 2011 6(6):1481-7). These authors using the Organ Procurement Transplant Network / United Network for Organ Sharing database, select adult primary kidney recipients



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transplanted from 2001 to 2007, divided into HBV + (surface antigen positive, n = 1346) and patients HBV- (surface antigen negative, n = 74.335). Five-year graft survival, patient survival, incidence hepatic failure, and associated risks were compared. The results of this analysis showed that HBV-infected kidney recipients are at higher risk for of liver failure compared with recipients HBV-, but not for kidney failure or death. Finally, this well performed paper does not add data of particular interest to the current literature on the subject.



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**Name of journal:** World Journal of Hepatology

**ESPS manuscript NO:** 13251

**Title:** ANTIVIRAL TREATMENT FOR CHRONIC HEPATITIS B IN RENAL TRANSPLANT PATIENTS

**Reviewer code:** 00503279

**Science editor:** Fang-Fang Ji

**Date sent for review:** 2014-08-14 15:02

**Date reviewed:** 2014-10-06 17:53

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<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	<input type="checkbox"/> Grade D: Rejected	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

### COMMENTS TO AUTHORS

This is nice work but needs to be revised very carefully by a native English language expert. 1-The manuscript is not numbered. 2-Typing errors and unclear sentences (Highlighted in the text in Yellow) 3-Grammatic errors (Highlighted in the text in Green) 4-You mentioned some abbreviations that you did not use again and you repeated some explanations for the abbreviations (Highlighted in the text in Red). Despite these issues it is worthy to publish this manuscript after minor revision.



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**Name of journal:** World Journal of Hepatology

**ESPS manuscript NO:** 13251

**Title:** ANTIVIRAL TREATMENT FOR CHRONIC HEPATITIS B IN RENAL TRANSPLANT PATIENTS

**Reviewer code:** 00008577

**Science editor:** Fang-Fang Ji

**Date sent for review:** 2014-08-14 15:02

**Date reviewed:** 2014-09-01 02:12

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<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	<input type="checkbox"/> Grade D: Rejected	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

### COMMENTS TO AUTHORS

This is a very complete review on the topic. I would indicate a mistake on page 8 where is written ETV instead of TDF in the paragraph of Tenofovir.



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**Name of journal:** World Journal of Hepatology

**ESPS manuscript NO:** 13251

**Title:** ANTIVIRAL TREATMENT FOR CHRONIC HEPATITIS B IN RENAL TRANSPLANT PATIENTS

**Reviewer code:** 00741993

**Science editor:** Fang-Fang Ji

**Date sent for review:** 2014-08-14 15:02

**Date reviewed:** 2014-09-24 14:21

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<input type="checkbox"/> High priority for publication
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<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> Existing	<input type="checkbox"/> Major revision
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### COMMENTS TO AUTHORS

Minor comments Please check spelling and grammar, examples Page 4: "...There is some debate about the better route to perform the liver biopsy given that patient with ESRD.." should be "...There is some debate about the better route to perform the liver biopsy given that patients with ESRD..." "Once transplanted this risk disappears with the restoration on normal renal function" Should be "Once transplanted this risk disappears with the restoration of normal renal function" Title of Table 1 should be: Table 1: Dosage Adjustment of Nucleos(t)ide Analogue for Patients with Reduced Creatinine Clearance