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PEER-REVIEW REPORT

Name of journal: World Journal of Methodology

Manuscript NO: 85318

Title: Compensated liver cirrhosis: Natural course and disease modifying strategies

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 02904354 Position: Peer Reviewer Academic degree: MD

Professional title: Academic Editor, Associate Chief Physician, Associate Professor,

Deputy Director

Reviewer's Country/Territory: China

Author's Country/Territory: India

Manuscript submission date: 2023-04-22

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-04-22 05:24

Reviewer performed review: 2023-04-29 02:28

Review time: 6 Days and 21 Hours

	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C:
Scientific quality	Good
	[] Grade D: Fair [] Grade E: Do not publish
Novelty of this manuscript	[] Grade A: Excellent [] Grade B: Good [Y] Grade C: Fair [] Grade D: No novelty
Creativity or innovation of	[] Grade A: Excellent [] Grade B: Good [Y] Grade C: Fair
this manuscript	[] Grade D: No creativity or innovation



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Scientific significance of the conclusion in this manuscript	[] Grade A: Excellent [Y] Grade B: Good [] Grade C: Fair [] Grade D: No scientific significance
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [Y] Minor revision [] Major revision [] Rejection
Re-review	[]Yes [Y]No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

This review is comprehensive. It should not be attributed to a minireview alone. Some In the Keywords section, the authors should provide the minor comments are listed. full names of cACLD and ACLF. The use of "et al" in the article should be unified. For example, in the INTRODUCTION section, the authors said "Wanless et al were the first to describe the reversal of ... in numerous series of LC patients with diverse etiologies". However, in the REGRESSION OF LC section, the authors said "Wanless et al. recognised a number of histologic characteristics of LC as ... aberrant parenchymal veins". In the NATURAL HISTORY OF CLC section, the authors said "The first decompensation of CLC does not always indicate a point of no return in the natural course of LC cirrhosis". "LC cirrhosis" should be modified as "LC". In the a. PHT section of the FACTORS ASSOCIATED WITH DECOMPENSATION OF CLC, the authors said "In a study, patients with an HVPG <10 mm Hg have a 90% probability of not developing clinical decompensation over 4 years". "HVPG <10 mm Hg" should be modified as "HVPG <10 mmHg". And the authors said "As the HVPG rises above 10 mmHg, which signify CSPH, risk of decompensation begins to rise [11]", where "[11]"



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should be superscripted. Moreover, check format (such as font, size and italic) of titles of the article carefully. For example, the font sizes of the "CLC" and the "Compensated advanced chronic liver disease (cACLD)" should be consistent. And the font sizes of the "INTRODUCTION" and the "DEFINITION" should be consistent.



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Reviewer's code: 03664074 Position: Peer Reviewer Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: India

Manuscript submission date: 2023-04-22

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-05-14 05:07

Reviewer performed review: 2023-05-19 08:11

Review time: 5 Days and 3 Hours

	[] Grade A: Excellent [] Grade B: Very good [] Grade C:
Scientific quality	Good
	[Y] Grade D: Fair [] Grade E: Do not publish
Novelty of this manuscript	[] Grade A: Excellent [Y] Grade B: Good [] Grade C: Fair [] Grade D: No novelty
Creativity or innovation of this manuscript	[] Grade A: Excellent [Y] Grade B: Good [] Grade C: Fair [] Grade D: No creativity or innovation
mis manascript	[] Grade D. Ivo creativity of hillovation



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Conclusion	[] Accept (High priority) [] Accept (General priority) [] Minor revision [Y] Major revision [] Rejection
Re-review	[Y] Yes [] No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

This manuscript has summarized the course and result of compensated liver cirrhosis and related therapeutic methods. The major problem is that author misleads the progression of compensated liver cirrhosis corresponding to its consequence of decompensated liver cirrhosis. The length of this manuscript was extremely spent for the transition between compensated and decompensated liver cirrhosis as well as several factors to interrupt or induce these different stages of liver cirrhosis. Hence, these demonstrations are not consistent with the tile and abstract of this manuscript. In addition, the structure of this manuscript is not proper. For example, the definition of CLC and cACLD can not be the independent section. Their definitions should be provided in the introduction concisely. The other, PHT is now thought to be the symptom of compensated liver cirrhosis and PHT can not be the factor associated with decompensation of compensated liver cirrhosis directly. Other factors should be reduced and integrated into the following section about disease modifying treatment strategies. The section of regression of LC (liver cirrhosis) should be deleted because it exceeds the range of this manuscript. Finally, figure 1 seems not exact because the total percentages



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are above 100% in the bottom. Table 4 should be removed because it is not coincided with the whole manuscript.