

## Format for ANSWERING REVIEWERS

August 29, 2014

Dear Editor,

Please find enclosed the edited manuscript in Word format

**Title:** Markers of acute rejection and graft acceptance in liver transplantation

**Author:** Giacomo Germani, Kryssia Rodriguez-Castro, Francesco Paolo Russo, Marco Senzolo, Alberto Zanetto, Alberto Ferrarese, Patrizia Burra

**Name of Journal:** *World Journal of Gastroenterology*

**ESPS Manuscript NO:** 11681

The manuscript has been improved according to the suggestions of reviewers:

Revision has been made according to the suggestions of the reviewer:

- (1) The reviewer recommends the authors to summarize them in a table in for better comprehension.  
*A table has been added to the manuscript. However, due to the high heterogeneity of the studies included in the review it is very difficult to create a complete and effective table. Therefore we limited our work to list all the markers of acute cellular rejection, stratifying them according to the text, and including all the references.*
- (2) Although the authors briefly summarized the strength, weakness, and significance in clinical utility of each marker in the Conclusion section, it also should be provided at the end of each section of the marker.  
*We thank the reviewer for the suggestion. A brief sentence at the end of each section has been added.*
- (3) Typographical or grammatical errors: Lines 35 and 70, immunosuppressive should be spelled out as immunosuppressive. Line 141, remain should be remains.  
*We corrected the typos*
- (4) There are grammatical errors (line 330-332).  
*We thank the reviewer, but we were not able to find the grammatical errors. If the reviewer can point out the specific error we will correct it.*
- (5) The biomarkers in blood, bile, and ascites are controversial, maybe a short discussion involved in this paper would be better.  
*We thank the reviewer for the suggestion. A brief discussion at the end of the section on bile and ascites markers has been added. We believe that the main limit of these markers is that they often requires invasive procedures such as the position of a T tube (which is no longer used in most of the liver transplant centres) or performing a paracentesis. This aspect is of great relevance in clinical practice because, liver biopsy, which is the gold standard for ACR diagnosis, is an invasive procedures and the clinical attention is posed mainly to non-invasive markers.*
- (6) This review just listed the markers of ACR and graft acceptance in liver transplantation without any logical discussions, and the backbones of this review is too simple. More personal thoughts



or prospectors suggested to be illustrated.

*We thank the reviewer for the suggestion. Due to the high number of markers studied in the literature and to the high heterogeneity of these studies, we tried to make the paper more clear and more schematic. We believe that personal thoughts and suggestions for future studies are present mainly in the conclusion section.*

Thank you again for publishing our manuscript in the *World Journal of Gastroenterology*.

Sincerely yours,

A handwritten signature in black ink, appearing to read 'G. Germani', with a long horizontal flourish extending to the right.

Giacomo Germani