

May 31, 2016

Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 25909-review).

**Title:** LIVER GRAFTS FROM HBSAG-POSITIVE DONORS: A REVIEW OF THE LITERATURE (*Edited title according to editorial team suggestions*)

**Author:** Loggi E, Conti F, Cucchetti A, Ercolani G, Pinna AD and Andreone P

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

**ESPS Manuscript NO:** 25909

The manuscript has been edited according to the suggestions of reviewers; please enclosed find a point-to-point reply to all the concerns.

Please note that the manuscript title has been changed. Each edit is underlined in the text.

**(Reviewer's code: 02528284):** *Only papers published in English were selected. This put some limits in the research but is acceptable.*

Author's reply: We decided to perform a selection of international, peer-reviewed, English papers to be sure to include in our analysis data previously submitted to universally accepted quality control rules. By the way, using PubMed as source, only two contributions, in Chinese language, were discarded. So we are quite confident the topic has been sufficiently covered.

**(Reviewer's code: 00227486):**

*To include information if available on gender and ethnicity.*

Author's reply: The gender is not an issue of these studies. About the ethnicity, we agree with the Reviewer. It should be underlined that very often there is not specification about the ethnicity of enrolled patients. However, the large part of experiences arises from Asian countries, consistently with the high-endemicity of HBV in those areas. This point, as well as the geographic origin of the studies, has been reported through the paper, in the data discussion. Furthermore, the point has been added in the concluding remarks.

**(Reviewer's code: 00068637):**

1. *"the references of the reviews should be added, and authors' name should in the right format"*

Author's reply: The author's name have been provided in right format. Please note that the references follow through the full paper, listed one by one when the specific article is cited and discussed.

2. *"what is Despite the challenging situation"*

Author's reply: We reformulated in an alternative way.

3. *"The persistence of HBsAg coupled [...]" is not clear. What dose author would like to express here?*

Author's reply: We would like to provide a speculation on the HDV recurrence. We

reformulated in an alternative way.

4. *What is “international normalized ratio”, and what is “inactive carrier status”?*

Author’s reply: international normalized ratio refers to INR. In that specific context, the elevation of the international normalized ratio and the thrombocytopenia could be laboratory manifestations of liver cirrhosis; so we wondered if the liver of the donors were already compromised, at some extent. The inactive carrier status is a clinical definition of chronic HBV, characterized by the absence of significant liver disease, BV DNA levels low or undetectable, normal ALT levels, and anti-HBe positivity (AASLD guidelines 2015, and EALS guidelines 2012).

5. *“These types of patients will require life-long anti-HBV treatment [...]”. What dose author would like to express “with or without transplantation”?*

Author’s reply: according to reviewer’s suggestion, the sentence has been reformulated to make it clearer.

6. *In the p.6, “HBsAg-positive inactive carriers”. What dose author would like to express of “HBsAg-positive inactive carriers”, and other HBV markers?*

Author’s reply: Please see above (point nr 4)

7. *In the Table 1 and 2, there no summary of HBV serology diagnosis of HBV in recipient and donor.*

Author’s reply: The tables report only the features of recipients, as all the data of both donors and recipients (even when available) are not easily summarizable.

8. *In the p.7, “In the study by Li, among the 92,157 patients undergoing LT, 78 HBsAg-positive graft recipients were selected [...]The sentence is not clear, and needed to be re-write. And more in the Table 1, there are no data match to Li’s study.*

Author’s reply: The first sentence reports the study design of the Li’s study and modalities of match between cases and controls; according to suggestion, more details are provided. About table 1, only data about HBsAg+ graft recipients are reported; even among them, the sero-virological features are not available.

9. *In the p.9, “In addition to histological examination, quantification of circulating HBsAg can provide higher confidence in the inactive status of donor”. What is the inactive status of donor?*

Author’s reply: Please see above (point nr 4).

10. *In this review has too many “In our opinion”*

Author’s reply: According to reviewer’s suggestion, this expression has been deleted/substituted at some point.

11. *Please re-write this part [...].*

Author’s reply: Following reviewer’s indication, the mentioned parts have been modified.

12. *The problems in Table 1 [...]*

Author’s reply: The format has been modified accordingly to the suggestions. Unfortunately, the data reported as NA are not available. We are aware it could make no sense to list articles where the selected information are not available. However, we chosen to maintain them in the tables, because we would like to provide to the reader a brief and complete summary of all the experiences about this kind of transplant.

We hope that, by addressing your concerns, the quality of the manuscript has improved. Thank you again for your interest in our manuscript.

Sincerely yours,  
Pietro Andreone, MD

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