

ANSWERING REVIEWERS

June 22, 2016

Dear Editor,



Please find enclosed the edited manuscript in Word format 27401-Edited.doc

Title: Retrospective Analysis of Hepatitis C Infected Patients Treated Through an Integrated Care Model

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Name of Journal: *World Journal of Gastroenterology*

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#### Response to Reviewer Comments

We thank the reviewers for their valuable feedback. We have revised the manuscript in accordance with the reviewers' comments and we explain our revisions below.

#### Reviewer #1-1: Lack of data for relapse in naïve patient with genotype 2

Response: The non-cirrhotic, treatment-naïve patient with GT2 who relapsed after being treated with 12 weeks of SOF and RBV was somewhat surprising to us. The VALENCE trial confirmed that this same regimen is 96.7% effective in naïve, non-cirrhotic patients with GT2 [30]. We cannot provide an explanation for why this particular patient relapsed.

#### Reviewer #1-2: Less SVR in naïve, than experienced explanation in Discussion.

Response: In the clinical studies we typically see lower SVR rates in treatment experienced compared to treatment naïve. One example of this was

demonstrated in *ledipasvir* and *sofosbuvir* for previously treated HCV genotype 1 infection published by Afdhal N (2), Reddy KR, Nelson DR, Lawitz E, et al. In our study we had higher SVR12 rates for treatment experienced (100%) compared to our treatment-naïve patients of which 91% in the ITT cohort and 94% in the PP cohort achieved SVR12. This was an unexpected finding and we cannot explain especially considering that more patients in the treatment-experienced cohort were cirrhotic compared to the treatment-naïve cohort (57.6% and 28.9% cirrhotic, respectively).

A handwritten signature in black ink, appearing to read "James M. Levin, MD". The signature is fluid and cursive, with a large initial "J" and a stylized "M" at the end.

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