

**REVIEWER 1 (code 02818788)**

**COMMENTS TO AUTHORS**

The paper is very interesting, well presented and discussed.

*Thank you for your kind comment.*

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**REVIEWER 2 (code 03294172)**

**COMMENTS TO AUTHORS**

This is a valuable manuscript but needs revision as follow: 1- Abstract: starting with HCC is not very relevant to the topic. 2- Introduction: very long - 1.2. not relevant to the topic and already well known - 1.4. No need to mention organ transplant, the focus should be on the liver - 1.5. too long, needs to be more concise 3- Discussion: 2.2. Please mention who many HBsAg positive donors were in the pool among which this 28 livers accepted and who many were rejected and the reason (if this data is available) 2.4. (the 6 deceased patients died not for HBV), please discuss the cause and time of death. (the graft and patient survival was 63.6 month) that sounds like the duration of follow up, as figure 2 shows patient and graft survival of 80%, so please clarify.

*Dear reviewer, thank you for your comments. We revised the manuscript accordingly and in detail:*

- 1- The abstract was modified removing the paragraph on HCC since it was not relevant to the main topic*
- 2- As suggested, we reduced in length the "Introduction" section*
- 3- Similarly, section 1.2 was deleted*
- 4- About paragraph 1.4, heart and lung transplant are no longer cited, while liver data were kept*
- 5- Paragraph 1.5 is now shorter*
- 6- Unfortunately, data about HBsAg positive donors not allocated in our center and not transplanted are not available.*
- 7- Cause and time of death of the 6 patients deceased without HBV recurrence were added in paragraph 2.4 as suggested*
- 8- Thank you for noting that 63.6 months was the mean follow-up and not graft, we promptly corrected the mistake.*

*All the corrections are highlighted in the main text.*

**REVIEWER 3 (code 03074879)**

**COMMENTS TO AUTHORS**

This manuscript shows value outcomes about application of hepatitis B surface antigen positive donors, that is marginal donors. but it needs some revisions: 1. It should be focus on the importance of marginal donors like HBsAg donors, not on the relationship of HCC and high risk factors. 2. General Features of Hepatitis B Virus should do not been depicted tediously long, as we all know. 3. As you discussed that "The 6 deceased patients died not for the Hepatitis B recurrence but for different reasons" and "The 4 Hepatitis B recurrences that we have followed during the post-LT didn't influence the graft and patient survival. From the surgical point of view, these grafts did not pose any particular risk in comparison to HBsAg-negative ones", please elucidate why these grafts have no risks but some others may be one of reasons effecting the graft and patient survival.

*Dear reviewer, thank you for your comments. We revised the manuscript accordingly and in detail:*

- 1- The paragraph on HCC was deleted*
- 2- Paragraph 1.2 was deleted from the introduction*
- 3- Cause and time of death of the 6 patients deceased without HBV recurrence were added as suggested. Moreover, the period "From the surgical point of view, these grafts did not pose any particular risk in comparison to HBsAg-negative ones" was deleted in order to avoid misinterpretation and due to its redundancy.*

*All the corrections are highlighted in the main text.*