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Part 1 Response to reviewers

Name of journal: World Journal of Gastroenterology

Manuscript NO: 50539

Title:Diagnostic value of the γ-GT/AST ratio, PIVKA-II and AFP in hepatitis B

virus-related hepatocellular carcinoma

Reviewer's code:03289360

Reviewer's country: Italy

Science editor:Ruo-Yu Ma

Reviewer accepted review: 2019-07-26 08:23

Reviewer performed review:2019-07-26 11:02

Review time:2 Hours

SPECIFIC COMMENTS TO AUTHORS

The authors are proposing that the association of 2 known markers for detection of hepatic cancer with a 3rd one, the gamma-GT/AST ratio, can offer an advantage in early diagnosis of the disease, and provide abundant data in support of this interpretation. The data is obviously provided with a noticeable potential to influence future attitudes in diagnosis of hepatic cancer. The manuscript submitted is of high quality, well organized and written, and all illustrations are complete and clear. No specific limitations are apparent to this reviewer.

Answer: Thank you very much for your comments on our manuscript.

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Title:Diagnostic value of the γ -GT/AST ratio, PIVKA-II and AFP in hepatitis B virus-related hepatocellular carcinoma



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Reviewer's code:00722239

Reviewer's country: Japan

Science editor:Ruo-Yu Ma

Reviewer accepted review: 2019-07-30 14:06

Reviewer performed review:2019-08-02 23:40

Review time:3 Days and 9 Hours

SPECIFIC COMMENTS TO AUTHORS

The authors have proposed the utility of γ -GT/AST ratio for the diagnosis of earlier-stage HBV-related HCC. The analyses were relatively well-performed. I consider their findings includes significant implications for the diagnosis of HCC. I have only two comments. First, the RESULTS section of Abstract is too long. It must be more summarized. Second, the consideration and discussion regarding "Why γ -GT/AST ratio reflects the early HCC" should be added at DISCISSION section.

Answer: Thank you very much for your comments on our manuscript. First, We have deleted some of the contents in the RESULTS section of Abstract, and retained the more important parts to make the results more concise. Second, We added the consideration and discussion of the reason "Why γ -GT/AST ratio reflects the early HCC" in discussion section as follows: It may be that intrahepatic obstruction in HCC induces hepatocytes to produce abundant γ -GT, while cancer cells also synthesize γ -GT, making the serum level of γ -GT elevated higher than that of benign liver disease, while AST elevated lower than that of benign liver disease, and this situation makes the γ -GT/AST ratio is conducive to earlier-stage HCC diagnosis.

Part 2 Response to editor

1. Audio core tip:



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In order to attract readers to read your full-text article, we request that the author make an audio file describing your final core tip, it is necessary for final acceptance. Please refer to Instruction to authors on our website or attached Format for detailed information. The accepted formats are mp3 or wma.

Answer: Audio core tip have been revised according to the Guidelines.

- 2. Please provide the decomposable figure of all the figures, whose parts are all movable and editable, organize them into a PowerPoint file, and submit as "Manuscript No. image files.ppt" on the system. Make sure that the layers in the PPT file are fully editable. For figures, use distinct colors with comparable visibility and consider colorblind individuals by avoiding the use of red and green for contrast **Answer:** The figures file have been revised according to the Guidelines.
- 3. Your manuscript should be prepared with Word-processing Software, using 12 pt Book Antiqua font and 1.5 line spacing with ample margins.

Answer: The format of this manuscript have been revised according to the Guidelines.

4. Please revise and perfect your manuscript according to peer-reviewers' comments. Please upload the required files on the system.

Answer: The response to peer-reviewers' comments are shown in Part one of this file.

5. Manuscript NO.

Answer: Manuscript NO. has been added.

6. Please rearrange all the authors' affiliations with Department, University or Institute, City, Postcode, Country, etc. (without any symbol or figure like * or 1, postcode must be there)

Such as: full name, address

Answer: Postcode has been added.

7. Co-first authors and co-corresponding authors are not allowed.



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Answer: Co-first authors and co-corresponding authors have been deleted in this manuscript.

8. You need to provide the grant application form(s) or certificate of funding agency for every grant, or we will delete the part of "Supported by...".

Answer: No funding support.

9. Institutional Review Board Approval Form or Document

Please upload the primary version (PDF) of the Institutional Review Board's official approval, prepared in the official language of the authors' country to the system; for example, authors from China should upload the Chinese version of the document, authors from Italy should upload the Italian version of the document, authors from Germany should upload the Deutsch version of the document, and authors from the United States and the United Kingdom should upload the English version of the document, etc.

Answer: Institutional review board statement has been revised in this manuscript, and we required the English version when we submitted the ethical application to the Ethics Committee of our hospital. This means that Institutional Review Board Approval Form or Document will be uploaded in English version.

10. Signed Informed Consent Form(s) or Document(s)

Please upload the primary version (PDF) of the Informed Consent Form that has been signed by all subjects and investigators of the study, prepared in the official language of the authors' country to the system; for example, authors from China should upload the Chinese version of the document, authors from Italy should upload the Italian version of the document, authors from Germany should upload the Deutsch version of the document, and authors from the United States and the United Kingdom should upload the English version of the document, etc.

Answer: Through consideration by the Ethics Committee, the experimental design



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and the program of the study will not cause harm and risk to the subjects. Due to the retrospective nature of this study and the actual medical condition of Nanchong, it's difficult to get informed consent from all patients involved in the study. The data collected were analyzed anonymously. So Ethics Committee of our Hospital waived the need for written informed consent from the all participants.

11. Corresponding author:

Corresponding author: Author names (unabbreviated) should be followed by the author's title in bold, and the affiliation, complete name of institution, present address, city, province/state, postcode, country, and E-mail.

Please add your title, such as MD, PhD, professor, etc.

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Please provide the Corresponding author's name, title, and detailed address.

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number, district number and telephone or fax number; for example, +86-10-85381892.

Answer: It has been revised according to the Guidelines and the editor's comments.

12. Abbreviations and acronyms are often defined the first time they are used within the abstract.

Answer: Abbreviations and acronyms have been revised in abstract section.

13. The requirement of Abstract.

Answer: We added the background section and revised the abstract section which conformed to the Guildlines of Format for Manuscript Revision-Retrospective Study.

14. Abbreviations and acronyms are often defined the first time they are used within the main text and then used throughout the remainder of the manuscript. Please consider adhering to this convention.

Answer: This has been revised.

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There are no spaces before [number].

Answer: It has been revised in this manuscript.

16. Please distinguish between the title of the article series. Three levels of subtitles are allowed: (1) First subtitle: All in bold and capital; (2) Second subtitle: All in bold and italic; and (3) Third subtitle: All in bold.

Answer: It has been revised in this manuscript.

17. Please don't include abbreviations in the subtitle.

Answer: It has been revised in this manuscript.

18. Statistical significance is expressed as ${}^{a}P < 0.05$, ${}^{b}P < 0.01$ (P > 0.05 usually does not need to be denoted). If there are other series of P values, ${}^{c}P < 0.05$ and ${}^{d}P < 0.01$ are used, and a third series of P values is expressed as ${}^{c}P < 0.05$ and ${}^{f}P < 0.01$.

Answer: It has been revised in this manuscript.

19. Country's name should be full name.

Answer: It has been revised in this manuscript.

20. Figure/table

For figures, use distinct colors with comparable visibility and consider colorblind individuals by avoiding the use of red and green for contrast.

Please don't include abbreviations in the title of the figure/table.

Please explain all the abbreviations in the figure/table legends as full name (abbreviation).

Please explain all the abbreviations of each figure/table under each piece of figure/table legends.

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Please create another file for all the supplementary figures and tables and name the file as "xxxxx-Supplementary material.pdf"



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Answer: All of those have been revised in this manuscript.

21. ARTICLE HIGHLIGHTS

Answer: We have added appropriate contents in this section.

22. Please check and confirm that there are no repeated references!

Answer: We have confirmed that there are no repeated references.

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Answer: We have corrected all cited references number, and keeped them superscript.

Please download the reference templete.

Answer: We have downloaded the reference templete and revised reference as required.

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PMID (http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?db=PubMed) (Please begin with PMID:) DOI (http://www.crossref.org/SimpleTextQuery/) (Please begin with DOI: 10.**)

Answer: We have been revised as required.