

29 June 2021

Dear Lian-Sheng Ma,

Editor-in-Chief

World Journal of Hepatology

Please find enclosed the resubmission of our original commissioned manuscript (Manuscript NO.: 64708, Review) "Saving time and effort: best practice for adapting existing Patient-Reported Outcome Measures in Hepatology", which we would like you to re-consider for publication as a review article in Patient Related Outcome Measures. I can confirm that the manuscript is new and has not been submitted or is under consideration elsewhere. All authors have made a significant contribution to the manuscript and have approved the final submitted version. The authors have no conflicts of interest to declare.

This review has now been extensively revised in light of your editorial and reviewer comments. Below is point-by-point responses to the respected reveiwers. We would be grateful if you would review this revised manuscript to determine its suitability for publication.

Yours sincerely,

Dr Laith Alrubaiy on behalf of co-authors

Reviewer #2:

Specific Comments to Authors: I read with interest this study which aims to provide a scoping review on the best practice for adapting existing PROMs. This review provides a valuable summary of information and can be useful for researchers and clinicians who are interested to use PROMs in their practice. However, this study is called a 'scoping review'. Scoping review is a systematic



review and must be done and reported according to the best available practice guidelines, like JBI or PRISMA (see my comments in the attached file). It is not possible to evaluate whether this review is conducted based on these guideline and appraise it accordingly since the methodology is not written based on these guideline. Accordingly, it is not possible to properly appraise the results according to the study aims. For example, it is mentioned that the aim is to evaluate the extent of literature and gaps but no such data is provided. The results are more a summery of the current literature categorised to some themes. Not saying that this has less value, as I mentioned above this is a very useful summary, but how we call this study should be based on what is actually done and how it is reported. Please see my specific comments in the attached file, hope they are useful to improve the quality of this report.

Response: Thank you for the helpful comments. We have now made the purpose of the paper clear to the reader with a more focused title. The paper provided a structured scoping review of the literature and have provided methods and a defined search strategy to define the scope of the review and the selection of literature. We believe that this is more appropriate for this review as we aimed to summarise the findings of the research to date with respect to best practice regarding adaptation of existing PROMs.

4 LANGUAGE QUALITY

Please resolve all language issues in the manuscript based on the peer review report. Please be sure to have a native-English speaker edit the manuscript for grammar, sentence structure, word usage, spelling, capitalization, punctuation, format, and general readability, so that the manuscript's language will meet our direct publishing needs.

Response: thank you. A native speaker (co-authors) reviewed and approved the article.

5 ABBREVIATIONS

In general, do not use non-standard abbreviations, unless they appear at least two times in the text preceding the first usage/definition. Certain commonly used abbreviations, such as DNA, RNA,



HIV, LD50, PCR, HBV, ECG, WBC, RBC, CT, ESR, CSF, IgG, ELISA, PBS, ATP, EDTA, and mAb, do not need to be defined and can be used directly. Now we list the abbreviations rules as follows.

Response: Thank you. This is now done.

6 EDITORIAL OFFICE'S COMMENTS

Authors must revise the manuscript according to the Editorial Office's comments and suggestions, which are listed below:

(1) Science editor: 1 Scientific quality: The manuscript describes a Review of the patient reported outcome measures in hepatology. The topic is within the scope of the WJH. (1) Classification: Grade A and Grade D; (2) Summary of the Peer-Review Report: This review provides a valuable summary of information and can be useful for researchers and clinicians who are interested to use PROMs in their practice. The questions raised by the reviewers should be answered; (3) Format: There are 6 tables and 1 figure; (4) References: A total of 99 references are cited, including 17 references published in the last 3 years; (5) Self-cited references: There are 5 self-cited references; The self-referencing rates should be less than 10%. Please keep the reasonable self-citations (i.e. those that are most closely related to the topic of the manuscript) and remove all other improper self-citations. If the authors fail to address the critical issue of self-citation, the editing process of this manuscript will be terminated; and (6) References recommendations: The authors have the right to refuse to cite improper references recommended by the peer reviewer(s), especially references published by the peer reviewer(s) him/herself (themselves). If the authors find the peer reviewer(s) request for the authors to cite improper references published by him/herself (themselves), please send the peer reviewer's ID number to editorial office@wjgnet.com. The Editorial Office will close and remove the peer reviewer from the F6Publishing system immediately. 2 Language evaluation: Classification: Grade A, Grade A. The authors are native English speakers. 3 Academic norms and rules: No academic misconduct was found in the Bing search. 4 Supplementary comments: This is an invited manuscript. No financial support was obtained for the study. The topic has not previously been published in the WJH. 5 Issues raised: (1) PMID and DOI numbers are missing in the reference list. Please provide the PubMed numbers and DOI citation



numbers to the reference list and list all authors of the references. Please revise throughout. 6 Re-Review: Required. 7 Recommendation: Conditional acceptance.

Response: Thank you. We have revised the references and removed unnecessary self-referencing. There are now only 3 self-references (out of 95 references) which we believe are necessary for the study.