

Point-by-point Response to Reviewer Comments

To

The Editors

World Journal of Hepatology

Dear Editors,

We would like to thank you for considering our manuscript for publication in the World Journal of Hepatology. We would also like to thank the reviewers for taking the time to review our manuscript and helping us improve the quality of our work. Please note that all the reviewer comments have been addressed in the re-submitted version of the manuscript and a point-by-point response has been provided for the reviewer comments. The manuscript has been thoroughly revised again to ensure the accuracy of the data and reporting. Additionally, the manuscript has been revised by a native English speaker for grammatical errors. All authors agree to the resubmitted version of the manuscript and have no conflict of interest to report.

Please feel free to reach out to me at any time regarding this manuscript at dush.dahiya@gmail.com

Sincerely,

Dushyant Singh Dahiya, MD

Central Michigan University College of Medicine

Saginaw, MI 48601, USA

Email: dush.dahiya@gmail.com

Reviewer Comments

Reviewer #1:

Specific Comments to Authors: The peer-reviewed article is well-planned and written. My critical remarks are few and purely technical. We did not find a statistically significant trend for mean LOS and mean THC (Page 11). Abbreviations should be explained at first appearance in the text. These two abbreviations have been explained, but further in the text. ...higher comorbidity burden with a higher proportion of patients with CCI \geq 3 (Page 11) - see above. Here, the abbreviation CCI was not explained in full. Journal titles and their abbreviated versions should be presented as in the PubMed database. Hepatol (Ref. 2) - Hepatol Int is right. Hepatology (Baltimore, Md.) (Refs 3, 14) - Hepatology is right. Hepatology Communications (Ref. 17) - Hepatol Commun is right. Nature genetics (Ref. 19) - Nat Genet is right. All references must be formatted in strict accordance with the Instructions for Authors! Here, all parts of the cited works are in simple type, while there should be special typing of the names of authors and Titles of journals. To be corrected. Native America (Table 4) - maybe, Native American is right, however, I'm not entirely sure about that. In the titles of the tables, the terms NAFLD and PUD are repeatedly presented both in full and in abbreviated form. Apparently, it is quite enough to use here abbreviated versions only. However, apparently, the correction of these inaccuracies does not require the participation of the Authors and can be done by in-house editing.

Author Response: We would like to thank you for taking the time to review our manuscript. We highly appreciate your efforts and enthusiasm in helping us improve the quality of our work. LOS and THC have been explained in the results section as that is where they are first presented in the text. Charlson Comorbidity Index has also been expanded in the results section where it first appears. Thank you for pointing out the references in the manuscript. They have been revised and changed to the correct form. In Table 4, Native America has been changed to Native Americans which is the correct form. We have also corrected the table titles.

Reviewer #2:

Specific Comments to Authors: The topic of the manuscript is relevant, since the burden of comorbidity in the world is high, including diseases of the digestive system. The authors for the first time assessed trends in hospitalizations and outcomes of hospitalizations for NAFLD with PUD. The authors found an increase in total hospital admissions and all-cause inpatient mortality in NAFLD with PUD hospitalizations and a growing trend towards NAFLD with PUD hospitalizations among Hispanics, which requires attention and further study. In addition, compared with hospitalizations for PUD without NAFLD, hospitalizations for PUD with NAFLD had lower all-cause inpatient mortality, mean length of stay, and mean total healthcare cost. Importantly, the authors showed that the incidence of H. pylori infection does not increase with the increase in NAFLD. The literature cited is up-to-date and without self-citation. Illustrative material is sufficient and understandable. The conclusion is informative and clear. The manuscript may be recommended for publication as presented, without revision.

Author Response: We would like to thank you for taking the time to review our manuscript. We highly appreciate your efforts and enthusiasm in helping us improve the quality of our work.

Reviewer #3:

Specific Comments to Authors: The manuscript is quite descriptive and depicts lot of hard work done by the authors in the compilation of data. The rise in cases over 10 years is only 60 so one can put it as there is no decline in cases of PUD with NAFLD as oppose to mentioning rise in no's. Also kindly state the reason of decrease mortality in whites even though there is rise in no's as compared to blacks. Kindly make the description more

specific and short with to the point statements and in the end give suggestions whether regular endoscopy in NAFLD is justified to treat them at an early stage.

Author Response: We would like to thank you for taking the time to review our manuscript. We highly appreciate your enthusiasm in helping us improve the quality of our work. We agree with you on all points. We have changed the text in the results, discussion, and conclusion sections to reflect that there was no decline in the total number of NAFLD hospitalizations with PUD in the US. Furthermore, the reason for decreasing trend of mortality for Whites and the increasing trend for Blacks and Hispanics has been added to the discussion section. Parts of the discussion have been revised to make it to the point as much as possible. Furthermore, we have also added suggestions with regard to performing upper endoscopy early in this subset population due to the increasing trend of inpatient mortality.

Again, we thank you for your time and efforts.

Company editor-in-chief:

I have reviewed the Peer-Review Report and the full text of the manuscript, all of which have met the basic publishing requirements of the World Journal of Hepatology, and the manuscript is conditionally accepted. I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report, Editorial Office's comments and the Criteria for Manuscript Revision by Authors. The quality of the English language of the manuscript does not meet the requirements of the journal. Before final acceptance, the author(s) must provide the English Language Certificate issued by a professional English language editing company. Please visit the following website for the professional English language editing companies we recommend: <https://www.wjgnet.com/bpg/gerinfo/240>. Before final acceptance, when revising the manuscript, the author must supplement and improve the highlights of the latest cutting-

edge research results, thereby further improving the content of the manuscript. To this end, authors are advised to apply a new tool, the Reference Citation Analysis (RCA). RCA is an artificial intelligence technology-based open multidisciplinary citation analysis database. In it, upon obtaining search results from the keywords entered by the author, "Impact Index Per Article" under "Ranked by" should be selected to find the latest highlight articles, which can then be used to further improve an article under preparation/peer-review/revision. Please visit our RCA database for more information at: <https://www.referencecitationanalysis.com/>. Uniform presentation should be used for figures showing the same or similar contents; for example, "Figure 1 Pathological changes of atrophic gastritis after treatment. A: ...; B: ...; C: ...; D: ...; E: ...; F: ...; G: ...". Please provide decomposable Figures (in which all components are movable and editable), organize them into a single PowerPoint file. Please check and confirm whether the figures are original (i.e. generated de novo by the author(s) for this paper). If the picture is 'original', the author needs to add the following copyright information to the bottom right-hand side of the picture in PowerPoint (PPT): Copyright ©The Author(s) 2023.

Author Response: We would like to thank you for taking the time to review our manuscript. We highly appreciate your efforts and enthusiasm in helping us improve the quality of our work. Please note that all the reviewer comments have been addressed in the re-submitted version of the manuscript and a point-by-point response has been provided for the reviewer comments. The manuscript has been thoroughly revised again to ensure the accuracy of data, reporting, and to ensure that the latest cutting-edge research results have been incorporated. Additionally, the manuscript has been revised by a native English speaker for grammatical errors. The citations have also been corrected. The figures have been provided as an editable PowerPoint file.