Dear Editor,

Re: manuscript number: 25117 - Boceprevir or Telaprevir in HCV chronic infection: the Italian real life experience.

Thank you very much indeed for inviting me to submit a paper.

The staff's editing suggestions and reviewers has been very useful and have contributed to the improvement of the manuscript. All authors thank them for their work.

In the new version of the manuscript, as required, all changes are shown in bold font. Below are the answers to individual Reviewers.

Reviewer's code: 03383645
We have made the suggested correlations and the significance test, with regard to adverse events, treatment discontinuation and patient demographics. The discussion has been improved and expanded. The correlations with other similar works have been expanded. Recommendations and limitations of the study were included.

Reviewer's code: 02941540
The manuscript, as suggested, and also requested by the publisher, was subjected to an agency (indicated by WJH) that has corrected the manuscript and has certified the correctness of the English language (the document, as requested, is attached). The problem of ethics is extremely important. Among the documents, it was attached the revision by the Governing Board (GB) of the organization of hospital hepatologists who authorized this data collection. This study, according to the current classification, is an observational (phase 4) study. Because the drugs used are commercially available and regularly reimbursed by the National Health Service, it does not require registration, and written informed consent. The GB however, obliged to request for a verbal consent for the use of data, anonymously as a matter of privacy. Only for people with disabilities, at every stage, it is required a signed consent of the legal guardian, but this study did not include patients with mental disabilities.

Reviewer's code: 03210617
1) The required definitions have been included in the "Methods" section.
2) All patients included were Caucasian, and no other races are included.
3) The number of patients who have used the one or the other therapy has been reported. We have not carried out a statistical analysis comparing the two treatments. The reasons are: 1) this comparison was not among the purposes of the study; 2) each Centre not only chose BOC or TVR in its absolute discretion, but also the type of pegylated interferon. This aspect would determinate the division into four groups with a very different dimension and would not give acceptable results. Moreover also the two other studies, similar to our, did not make any comparative analysis between the two treatments because of the same reasons (CUPIC Study and HCV TARGET Study).
4) The required p values have been added, also in Multivariate analysis.
5) We have added some other reference. Unfortunately, the papers published similar to ours are very few.

Reviewer's code: 03021970
1) I must say that the suggested title I really like. Unfortunately the length allowed by the WJH for the title should be no more than 12 words. Your suggested title is 17 words.
2) The patients were divided into three groups: 1) less than 50, 2) patients between 50 and 65, 3) patients over the age of 65. In this way, we tried to avoid the division into two categories only (under 65 and over 65) that is present in many papers and that flattens the differences. This explanation has been added in the text.

After running all the suggestions, we send back the correct and amended text for the final judgment.
In any case, thanks for inviting me to collaborate with the WJH, of which I have pleasure to remain a member of the Editorial Board for a long time.

Kindest regards

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