

Review Form 3

Journal Name:	International Research Journal of Gastroenterology and Hepatology
Manuscript Number:	Ms_IRJGH_128171
Title of the Manuscript:	Prevalence and risk factors for metabolic-dysfunction associated fatty liver disease in South Indian population
Type of the Article	Original Research Article

PART 1: Comments

	Reviewer's comment	Author's Feedback <i>(Please correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)</i>
Please write a few sentences regarding the importance of this manuscript for the scientific community. A minimum of 3-4 sentences may be required for this part.	The chosen research topic is relevant, since the prevalence of metabolic dysfunction-associated fatty liver disease (MAFLD) and its variability is continuously growing and is increasingly common in individuals with normal body weight and without type 2 diabetes mellitus. In this regard, identifying any predictors of the severity and outcomes of MAFLD in patients depending on the clinical phenotype and changes in laboratory parameters is important and requires careful study. However, the identified variability dictates the need for strict adherence to the nomenclature of available options AASLD and its members have been one of the leading multinational liver societies that developed and finalized the new nomenclature for liver disease, which was announced in June 2023 with title "The NAFLD nomenclature is changing". The experts identified the following options: SLD - Steatotic Liver Disease, MASLD - Metabolic Dysfunction Associated Steatotic Liver Disease, MetALD – Metabolic alcoholic Liver Disease, Cryptogenic SLD This opens up opportunities for the community to update disease nomenclature and subphenotyping to accelerate the translational pathway to new methods of care.	
Is the title of the article suitable? (If not please suggest an alternative title)	The title of the article suitable	

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<p>Is the abstract of the article comprehensive? Do you suggest the addition (or deletion) of some points in this section? Please write your suggestions here.</p>	<p>The abstract of the article comprehensive However, it is desirable to present proportional values with confidence intervals.</p>	
<p>Is the manuscript scientifically, correct? Please write here.</p>	<p>The manuscript scientifically, partly uncorrect. Comments. 1. INTRODUCTION: no additional information is provided on the nomenclature of liver steatosis variants and their characteristics, and there is no assessment of the uncertainty in identifying indicators for assessing dysmetabolism. 2. METHODOLOGY: "if imaging showed presence of hepatic steatosis" - not enough for scientific research, it is necessary to indicate the method and indicators for assessing the degree of severity of steatosis; the list of biomarkers for assessing dysmeiabolism does not include C-reactive protein and determination of insulin resistance; it is necessary to detail the measurements (measurement level, accuracy -0.1, 0.5, 1.0 cm) for waist circumference (WC), and hip circumference (HC). "A diagnosis of MAFLD was made if imaging showed presence of hepatic steatosis along with any of the following conditions such as overweight or obesity, diabetes and metabolic dysfunction" - It is necessary to detail the criteria, including their number (only one, or two, or three, etc.). The exclusion criteria do not include all pathology variants; there is no myocardial infarction, heart failure, kidney pathology, neurological pathology, etc. 3. RESULTS: Percentage values should be presented with a confidence interval, and if prevalence is indicated, the values should be presented in options for 100, 1000, 10000 cases per time interval (month, year). Below the tables, it is necessary to provide a decoding of the abbreviations in the tables (example - Table 1. Clinical characteristics of the study participants) "Table 3. Comparison of the association between MAFLD and other related risk variables"- the table does not contain association indicators, estimates of the difference in values by groups are presented in the form of standard descriptive statistics with the significance of the difference in groups, this is not considered an association indicator.</p>	
<p>Are the references sufficient and recent? If you have suggestions of additional references, please mention them in the review form.</p>	<p>Additional references: De et al. Metabolic dysfunction-associated steatotic liver disease (MASLD) definition is better than MAFLD criteria for lean patients with non-alcoholic fatty liver disease (NAFLD). J Hep 2023. Marakhouski Y.K., Vasileuskaya S.A. Clinical Aspects for Mutual Relations between Biological Age, Steatosis and Liver Fibrosis. International Journal of Research in Medical and Clinical Sciences; 2023;1(2);01-04</p>	
<p>Is the language/English quality of the article suitable for scholarly communications?</p>	<p>This position is beyond my competence as English is not my native language.</p>	
<p>Optional/General comments</p>	<p>The presented scientific research may be published after revision and clarification.</p>	

PART 2:

	Reviewer's comment	Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
<p>Are there ethical issues in this manuscript?</p>	<p><i>(If yes. Kindly please write down the ethical issues here in details)</i></p>	

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