We read with great interest the article by Wong and colleagues (1). Hepatic fibrosis is the most important determinant of mortality in patients with NAFLD (2). Although noninvasive tests or imaging modalities such as FibroScan and MR elastography have been developed for evaluation of hepatic fibrosis (3), liver biopsy is now the gold standard. Liver biopsy has several drawbacks including intra-observers’ and inter-observers’ variability (4-7), because the histology-based fibrosis is depend on the subjective evaluation by the pathologists. In this article, automated quantification of fibrosis-related parameters (q-FPs) using dual-photon microscopy can accurately diagnose fibrosis stage and predict cumulative incidence of liver-related events (1). It is expected that this novel method will replace diagnosis by pathologists. In this article, automated quantification of fibrosis-related parameters (q-FPs) using dual-photon microscopy can accurately diagnose fibrosis stage and predict cumulative incidence of liver-related events (1). It is expected that this novel method will replace diagnosis by pathologists. The strength of this study was based on not only cross-sectional data (n=344) also longitudinal data (n=97). Limitations in this article exist as authors mentioned. We wonder whether this method can be applied to other ethnic population. An international multi-center trial should be performed for independent external validation. We expect that this novel method can contribute to future clinical trials of NASH drug pipelines for avoiding pathological observers’ variabilities.

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Footnote
All authors have completed the ICMJE uniform disclosure form and declare: The authors have no conflicts of interest to declare.

Ethical Statement: The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

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