Tanggal 26 Feb 2020 *corresponding author* submit jurnal

[SLJCH] Submission Acknowledgement - "The Agreement of CMV Serology Examination And CMV PCR of Liver Tissue in Infant With Cholestasis"

Sri Lanka Journal of Child Health <no-reply@ubiquitypartnernetwork.com> Rab, 26 Feb 2020, 20.46

Dear Dr Bagus Setyoboedi,

Thank you for submitting the manuscript, "The Agreement of CMV Serology Examination And CMV PCR of Liver Tissue in Infant With Cholestasis" to Sri Lanka Journal of Child Health. With our online journal management system, you will be able to track its progress through the editorial process by logging in to the journal web site.

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Thank you for considering this journal as a venue for your work. Please get in touch should you have any questions regarding your paper.

Kind regards,

-- Sri Lanka Journal of Child Health editorial team.

Tanggal 9 Mar 2020 *corresponding author* mendapatkan balasan dari editor jurnal

The agreement of cytomegalovirus (CMV) serology examination and CMV polymerase chain reaction of liver tissue in infants with cholestasis

Dr. G.N. Lucas <drgnlucas@gmail.com> Sen, 9 Mar 2020, 19.38

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Dear Bagus Setyoboedi (Corresponding author)
As indicated in the web site of the Sri Lanka Journal of Child Health, it is now necessary for us to have your internationally recognised ORCID ID (ORCID Identification Number) to be included in the manuscript. This number has a format such as **0000-0001-7789-8793**, which is the ORCID ID of Dr. B.J.C. Perera, the other Joint Editor.

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The article will not be accepted for publication unless the ORCID IDs of all the authors are received.
Regards
Dr G N Lucas
Joint Editor SLJCH
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On Wed, 11 Mar 2020 at 20:39, BAGUS SETYOBOEDI <bagus.setyoboedi@fk.unair.ac.id> wrote:

Dear

Dr G N Lucas
Joint Editor SLJCH

Here the orchid number of authors in the paper with the title :

The Agreement of CMV Serology Examination And CMV PCR of Liver Tissue in Infant With Cholestasis

Bagus Setyoboedi https://orcid.org/0000-0002-3923-6913 (corresponding author)

Reny Widayanti https://orcid.org/0000-0002-7126-6020

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Thank you

Hopefully our manuscript can be accepted in your journal

Best regards

Bagus Setyoboedi

Tanggal 12 Mar 2020 *corresponding author* mendapatkan balasan dari editor jurnal

Dr. G.N. Lucas <drgnlucas@gmail.com> Kam, 12 Mar 2020, 10.26

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Thanks. A final decision on your article will be made at the next Editorial Board Meeting on 20 March

Regards
Dr Lucas

Tanggal 20 Mar 2020 *corresponding author* mendapatkan balasan dari editor jurnal

The agreement of cytomegalovirus (CMV) serology examination and CMV polymerase chain reaction of liver tissue in infants with cholestasis

Dr. G.N. Lucas <drgnlucas@gmail.com> Jum, 20 Mar 2020, 15.26

kepada saya

Dear Dr. Setyoboedi
Your original article"The agreement of cytomegalovirus (CMV) serology examination and CMV polymerase chain reaction of liver tissue in infants with cholestasis" has been accepted for publication in the Sri Lanka Journal of Child Health. The revised version is attached. If you wish to make any changes, please highlight the changes and e-mail it back to me.
Regards
Dr. G N Lucas
Joint Editor SLJCH

Tanggal 23 Mar 2020 *corresponding author* memberikan balasan email dari editor jurnal

From: BAGUS SETYOBOEDI <bagus.setyoboedi@fk.unair.ac.id>
To: "Dr. G.N. Lucas" <drgnlucas@gmail.com>
Cc: reny@yahoo.com, sjamsul.arief@yahoo.com, yanti@dr.com, rendiskaji@yahoo.com
Bcc:
Date: Mon, 23 Mar 2020 09:36:53 +0700
Subject: Re: The agreement of cytomegalovirus (CMV) serology examination and CMV polymerase chain reaction of liver tissue in infants with cholestasis
Yes, I accept.

Tanggal 4 Jan 2021 *corresponding author* mendapatkan balasan dari editor jurnal

The agreement of cytomegalovirus (CMV) serology examination and CMV polymerase chain reaction of liver tissue in infants with cholestasis

Dr. G.N. Lucas <drgnlucas@gmail.com> Sen, 4 Jan 2021, 21.31

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Dear Dr. Bagus Setyoboedi
Please e-mail me the number of the ERC certificate or alternatively a copy of the ERC certificate.
Regards
Dr. G N Lucas
Joint Editor SLJCH

Tanggal 5 Jan 2021 *corresponding author* memberikan balasan email dari editor jurnal

Dr. G.N. Lucas <drgnlucas@gmail.com> Sel, 5 Jan 2021, 13.03

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Dr Lucas

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Dear Dr. G N Lucas, Joint Editor SLJCH

Herewith I send a copy of the ERC certificate from my paper as you requested

Regards
Bagus Setyoboedi

SRI LANKA JOURNAL OF CHILD HEALTH
The official publication of The Sri Lanka College of Paediatricians

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24/03/2020

To whom it may concern

The following article has been accepted for publication in the Sri Lanka Journal of Child Health (SLJCH).

Original Article: The agreement of cytomegalovirus (CMV) serology examination and CMV polymerase chain reaction of liver tissue in infants with cholestasis
Bagus Setyoboedi, Reny Widayanti, Sjamsul Arief, Dwiyanti Puspitasari, Rendi Aji Prihaningtyas

The corresponding author is *Bagus Setyoboedi* of the Airlangga University, Surabaya, Indonesia
E-mail: setyoboedi@fk.unair.ac.id

It is scheduled to be published in the June 2021 issue of the SLJCH

Yours sincerely,

Dr. G. N. Lucas
Joint Editor, Sri Lanka Journal of Child Health

The agreement of cytomegalovirus (CMV) serology examination and CMV polymerase chain reaction of liver tissue in infants with cholestasis

***Bagus Setyoboedi[1], Reny Widayanti[1], Sjamsul Arief[1], Dwiyanti Puspitasari[1], Rendi Aji Prihaningtyas[1]**

Sri Lanka Journal of Child Health, 2021; **50**:

Abstract

Introduction: The incidence of cholestasis in infancy is associated with congenital or viral infection. Commonest cause is *Cytomegalovirus* (CMV) infection. In Indonesia, diagnosis of cholestasis due to CMV infection is still not optimal because the support of virological examination is still limited, so serological examination is an option.

Objective: Analysing the agreement of CMV IgG or IgM serological examination and CMV polymerase chain reaction (PCR) examination of liver tissue in infants with cholestasis

Method: This is an analytic observational research using cross sectional design. Samples were infants with cholestasis, 1-12 months of age, in the Department of Child Health Dr. Soetomo Hospital, who met the inclusion criteria. Samples were taken from December 2017- May 2018. Liver biopsy was carried out in Department of Child Health, Dr. Soetomo Hospital. CMV PCR examination of liver tissue was carried out in the Tropical Disease Laboratory at Airlangga University. Data were analysed by calculating the kappa coefficient CMV IgG or IgM serology examination and CMV PCR examination of liver tissue.

Results: There were 30 infants with cholestasis, consisting of 16 (53%) boys and 14 (47%) girls. Positive CMV IgG was found in 28 subjects and CMV IgM was found in 15 subjects. CMV PCR was positive in 20 (67%) subjects. The most common age range with positive CMV IgG and IgM as well as CMV PCR was 1-3 months. Agreement of CMV IgG compared to CMV PCR of liver tissue showed weak result with kappa value of 0.25. The agreement of CMV IgM compared to CMV PCR of liver tissue was not found with kappa value 0.00.

Conclusions: In infants with cholestasis, there is no agreement for CMV serological examination with CMV PCR of liver tissue. CMV serologic examination cannot replace CMV PCR of liver tissue to determine the presence of CMV virus in infant with cholestasis.

(Key words: cholestasis, CMV serology, CMV PCR liver tissue, agreement, infant).

Introduction

Cholestasis is a decrease or obstruction of bile flow at each level to the extrahepatic biliary tract and duodenum[1]. Cholestasis is found in 1 in 2500 births[2]. Incidence of cholestasis in infancy is associated with congenital or viral infection. Commonest cause is *Cytomegalovirus* (CMV) infection. Research conducted in Brazil on 76 infants with cholestasis showed 29.4% positive for CMV serology in intrahepatic cholestasis and 28.5% positive for CMV serology in extrahepatic cholestasis[3]. CMV infection is diagnosed in neonates by isolating the virus from urine, detecting IgM in blood, detecting CMV antigen in blood and identifying CMV-DNA by polymerase chain reaction (PCR)[4]. CMV-DNA can be taken from blood or tissue[5].

Research conducted in Brazil showed a positive frequency of CMV-DNA of 34.3% of 35 samples of liver tissue examined[6]. Research in Poland in nine children with cholestasis showed 9 CMV IgG positive, 4 CMV IgM positive, and 9 CMV DNA positive in the blood but on immunohistochemistry and molecular examination in liver biopsy tissue, CMV was not found[7]. Research in Brazil showed that in comparison with PCR, serology had a low sensitivity (33.3%) and a low positive predictive value (28.6%)[8]. In Indonesia, diagnosis of cholestasis due to CMV infection is still not optimal because the support of virological examination is still limited, so serological examination is an option.

Objectives

Analysing the agreement of CMV IgG or IgM serological examination and CMV PCR examination of liver tissue in infants with cholestasis

Method

This is an analytic observational research using cross sectional design. Subjects were 1-12 months old infants with cholestasis in the Department of

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The authors declare that there are no conflicts of interest
Personal funding was used for the project.

Child Health, Dr. Soetomo General Hospital, who met the inclusion criteria. Samples were taken during a 6 month period from December 2017-May 2018. This study was approved by the ethics committee of Dr. Soetomo General Hospital. Parental written informed consent was obtained prior to data collection.

Total sampling was performed in this study. Inclusion criteria were infants with cholestasis 1-12 months of age. The exclusion criteria were severe infection (septicaemia), HIV, miliary tuberculosis, severe malnutrition, thrombocytopenia, prolonged clotting time, ascites and a history of using immunosuppressants like steroids and cytostatic agents. Liver biopsy was carried out in the Department of Child Health Dr. Soetomo Hospital. Serology examination was carried out in the clinical pathology laboratory in the Dr. Soetomo Hospital. CMV PCR examination of liver tissue was carried out in the Tropical Disease Laboratory at Airlangga University. Descriptive statistics and calculating the kappa coefficient CMV IgG or IgM serology examination and CMV PCR examination of liver tissue were done.

Results

During the 6 month period, 33 subjects were sampled, 30 subjects met the inclusion criteria and 3 subjects were excluded, 2 with severe infection (sepsis) and 1 with ascites. The basic characteristics of the sample are shown in Table 1. The average age in this study was 3.6 months.

Table 1: ***Basic characteristics of the sample (n=30)***

Variable	Result
Sex - n (%)	
Male	16 (53)
Female	14 (47)
Age in months - n (%)	
1-3	20 (66.7)
4-6	06 (20.0)
7-9	02 (06.7)
10-12	02 (06.7)
AST in IU – Mean (SD)	221.7 (153.3)
ALT in IU - Mean (SD)	161.4 (86.5)
Direct bilirubin in mg/dl Mean (SD)	8.16 (4.51)
Total bilirubin in mg/dl Mean (SD)	11.11 (5.77)

AST: Aspartate transaminase, ALT: Alanine transaminase

Based on the results of CMV serology, out of 30 study subjects, CMV IgG was positive in 28 patients, and CMV IgM was positive in 15 patients. Age distribution based on CMV serology results shows that the most common age range with CMV IgG and CMV IgM positive is at 1-3 months of age (Figure 1).

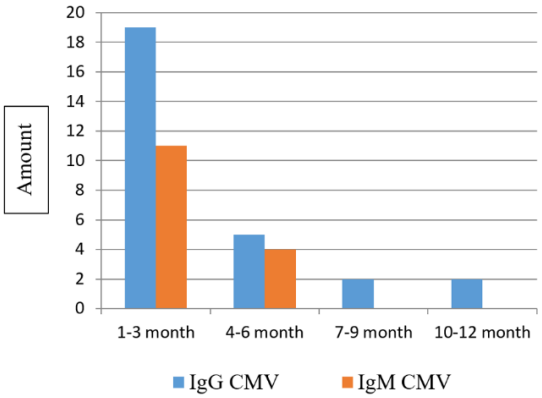

Figure 1: ***Age distribution based on CMV serology***

Based on CMV PCR results of liver tissue, CMV PCR was positive in 20 (67%) and CMV PCR was negative in 10 (33%). The most positive CMV PCR was found in the 1-3 month age range in 15 (75%) subjects (Figure 2).

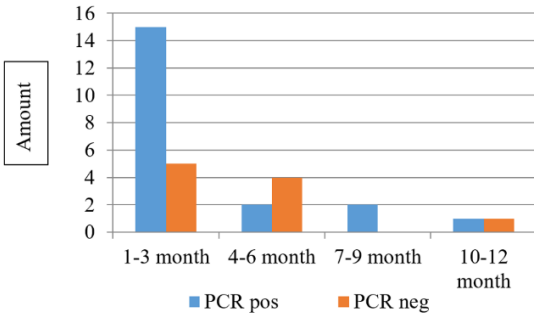

Figure 2: ***Age distribution based on CMV PCR in liver tissue***

From CMV serologic examination compared with CMV PCR liver tissue was obtained, from 28 subjects with positive CMV IgG, CMV PCR positive liver tissue as much as 20 (71.4%). Based on CMV IgM results compared to CMV PCR liver tissue, from 15 subjects with positive CMV IgM, positive CMV PCR of liver tissue as many as 10 (66.7%) subjects (Table 2).

Table 2: ***Results between CMV serology and CMV PCR liver tissue***

Variable		PCR CMV		Total
		Negative	Positive	
IgG CMV	Negative	02	0	02
	Positive	08	20	28
IgM CMV	Negative	05	10	15
	Positive	05	10	15

The agreement of CMV IgG compared to CMV PCR of liver tissue obtained a weak agreement with kappa value of 0.25. The agreement of CMV IgM compared to CMV PCR of liver tissue was not in agreement with a kappa value of 0.00 (Table 3).

Table 3: ***Results of kappa suitability between CMV serology and CMV PCR liver tissue based on age***

Age	IgG CMV with PCR CMV	IgM CMV with PCR CMV
	Kappa	Kappa
1-3 months	0.273	0.053
1-4 months	0.362	0.015
1-6 months	0.272	0.031
1-12 months	0.250	0.000

In terms of age, at 1-3 months and 1-4 months of age, CMV IgG compared to CMV PCR liver tissue had a weak agreement with kappa values of 0.273 and 0.362. At the age of 1-6 months also CMV IgG compared to CMV PCR liver tissue had a weak agreement with kappa value 0.272 (Table 3).

Based on the sensitivity test and specificity test IgG CMV against CMV PCR, sensitivity was 100%, specificity was 20%, positive predictions were 71.4%, negative predictions were 100% and accuracy was 73.3%. Whereas for IgM CMV against CMV PCR, sensitivity was 50%, specificity was 50%, positive predictions were 66.7%, negative predictions were 33.4% and accuracy was 50%.

Discussion

From this study, the age range in as many as 20 (66.7%) subjects, was 1-3 months. The mean age of the study population was 3.6 months. In research conducted in Brazil, the median age of subjects at the first visit was 82.5 days (± 3 months)[6]. In a study conducted in India, in 101 infants with neonatal cholestasis, the mean age of the subjects was 2.8 ± 1.7 months[9]. In another study, the average age at time of liver biopsy was 2.5 ± 1 month[10]. In this study there were 53% males. Studies by Liberek (2002), Brandao (2009) and Goel (2018) also showed greater male prevalence[8,10,11]. In this study, the mean AST and ALT values were 221.7 mg/dl and 161.4 mg/dl respectively. A study by Liberek (2002) had AST 156 mg/dl / ALT 169 mg/dl, a study by Talachian (2014) had AST 280 mg/dl / ALT 238 mg/dl and a study by Sira (2016) had AST 134 mg/dl / ALT 230 mg/dl[11,12,13].

From the 30 study subjects, CMV IgG was positive in 28 (93%) and CMV IgM was positive in 15 (50%). Research in Brazil on 76 subjects with neonatal cholestasis was divided into 2 groups, intrahepatic cholestasis (34) and extrahepatic cholestasis (42); in the intrahepatic cholestasis group, CMV IgM was positive in 29.4%, while in the extrahepatic cholestasis group, CMV IgM was positive in 28.5%[3]. In the study conducted in Poland, all 9 subjects with cholestasis were CMV IgG positive and 4 were CMV IgM positive[7]. In an African study of 78 infants with prolonged jaundice, 72 (92.3%) were CMV IgG positive and 31 (39.7%) were CMV IgM positive; the 92.3% positive CMV IgG is likely due to maternal IgG transfer via the placenta or IgG production because the baby is infected, even though 39.7% positive for IgM in the baby, presumably because there was a possibility of infection in the uterus[14]. CMV IgG is useful to determine whether the patient has been infected with CMV in the past, whilst IgM antibodies indicate an acute condition or new infection[5].

In the current study, the highest number of positive CMV IgG and IgM subjects were found in the 1-3-month age range. Research in China showed that primary infection with CMV in children occured in the age range 1-3.5 months and that there was very high anti-CMV IgG seroprevalence in young infants (<6 months) due to persistent maternal antibodies[15]. Generally, moderate to high levels of IgM antibodies can be detected at 1-3 months after the onset of infection, after which IgM levels begin to fall but remain positive for more than 9 months after primary infection[16].

In our study of 30 subjects, 20 (67%) were liver tissue CMV PCR positive. These results indicate high CMV frequency in infants with cholestasis. In a study in Taiwan, 26 liver tissue subjects with biliary atresia were positive for HCMV DNA in liver tissue with PCR of 2 (7.6%)[17]. In research from Brazil, from 33 liver tissue in subjects with extrahepatic cholestasis, 9 (27.3%) subjects with PCR were positive for HCMV DNA[6]. Research in India, from 31 subjects with neonatal cholestasis, found positive CMV PCR liver tissue with PCR in 16 (52%)[10]. Variations in CMV PCR results in liver tissue may be explained because of the few patients involved in study as well as the geographic variation of subjects[18].

CMV PCR positive liver tissue was mostly found in the 1-3-month age range. Research in India on 31 infants with neonatal cholestasis, where the average age at the time of liver biopsy was 2.5 ± 1.0 months, positive CMV PCR was 16 (52%)[10]. CMV serological examination compared with CMV PCR of liver tissue, from 28 subjects with positive CMV IgG, 20 positive PCR (71.4%) subjects. CMV IgG

compared to CMV PCR obtained a weak agreement with a kappa value of 0.25. Research conducted in India 26 CMV IgG positive subjects, 15 (58%) positive CMV PCR liver tissue with a kappa 0.2 value[10]. In the Brazilian study, 9 CMV IgG positive subjects, 3 subjects were positive for HCMV DNA. CMV IgG represents the presence of transplacental maternal IgG[6].

CMV IgM results compared to CMV PCR of liver tissue, from 15 subjects with positive CMV IgM, 66.7% positive PCR subjects. In this study, CMV IgM compared with CMV PCR did not obtain agreement with kappa value 0.00. Research in Poland, in 9 children with cholestasis, obtained a weak correlation between positive serological results and virus detection in liver tissue[7]. Other studies have shown a positive association between CMV IgM and CMV PCR in liver tissue even though the relationship was very weak. It is suspected that CMV IgM is a poor indicator of the presence or absence of CMV in liver tissue[10]. In infants with CMV serology positive but liver tissue PCR negative, possibly at the time of the study, subjects passed the acute phase of hepatitis due to CMV where the CMV virus was eliminated from liver tissue by the host immune system or CMV infection may be outside liver tissue or hepatitis caused by other aetiologies. Infants with positive HCMV DNA with PCR on liver tissue but negative CMV serology may not produce enough antibodies for some unknown reason[17].

This study showed that at the age of 1-3 months, 1-4 months, 1-6 months and 1-12 months, CMV IgG compared to CMV PCR liver tissue, obtained a weak agreement. There was no agreement obtained in CMV IgM in that age range. Other studies have shown that serological examination has weak accuracy to detect active CMV virus infections[6]. There was weak correlation between positive serology and detection of CMV virus in liver tissue[7]. CMV blood serology or PCR is not an accurate marker for CMV infection in liver tissue[10]. CMV IgM and CMV IgG serology examination is not recommended for diagnosing CMV infection in infants. CMV IgG positivity reflects IgG antibodies obtained from the mother through the placenta and not diagnosis of CMV infection. Maternal IgG antibodies can last up to 18 months in infants. IgG antibodies that remain in infants cannot distinguish congenital, natal or postnatal infections[19].

In this study, CMV IgM sensitivity to CMV PCR liver tissue was 50%, specificity 50%, accuracy 50%, positive predictive value 66.7% and negative predictive value 33.4%. Other studies also showed CMV IgM sensitivity to CMV PCR liver tissue was 69% and specificity was 61%[10]. Research in Brazil showed CMV PCR of liver tissue compared to serology with sensitivity of 54%, specificity of 61% and accuracy of 59%[6]. Compared to PCR, serology has a high accuracy of 82.4%, sensitivity of 33.3%, specificity of 88.9%, positive predictive value of 28.6%, and negative predictive value of 90.01%[8]. Examination of CMV IgM antibodies for primary infection has less specificity, because IgM can be positive in active CMV infection[5]. In patients with positive CMV IgM but negative DNA PCR, results are likely to be due to false positive results from IgM. False positives can be secondary to the presence of rheumatoid factors (infant IgM against maternal IgG) or cross-reaction with herpesviruses. In patients with IgM negative but positive PCR DNA, results are likely to be due to false negative. False negative results are likely secondary due to competition between high maternal IgG antibody levels and relatively low infant IgM levels[6].

One limitation of this study is that the biopsy sample was taken with a special needle biopsy on the liver tissue so that the sample obtained was not as good as if the sample was taken during surgery. Ideally, samples should be taken from the bile duct tissue during Kasai surgery. Another drawback of this study is not to examine the types of intrahepatic or extrahepatic cholestasis. The results of this study found no agreement of CMV serological examination and CMV PCR liver tissue in infant cholestasis.

Conclusions

In infants with cholestasis, there was no agreement for CMV IgM examination with CMV PCR of liver tissue. However, for CMV IgG with CMV PCR of liver tissue, there was low agreement. Serologic examination of CMV IgG or IgM is not sensitive and specific, and cannot replace CMV PCR of liver tissue to detect the presence of CMV virus in infant cholestasis.

Acknowledgements

The authors thank to Dr. Soetomo General Hospital, Surabaya for supporting this study.

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[SLJCH] Submission Acknowledgement - "The Agreement of CMV Serology Examination And CMV PCR of Liver Tissue in Infant With Cholestasis"

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Kepada: bagus.setyoboedi@fk.unair.ac.id

Dear Dr Bagus Setyoboedi,

Thank you for submitting the manuscript, "The Agreement of CMV Serology Examination And CMV PCR of Liver Tissue in Infant With Cholestasis" to Sri Lanka Journal of Child Health. With our online journal management system, you will be able to track its progress through the editorial process by logging in to the journal web site.

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Kepada: rendiskaji@yahoo.com

[Kutipan teks disembunyikan]

BAGUS SETYOBOEDI <bagus.setyoboedi@fk.unair.ac.id>

The agreement of cytomegalovirus (CMV) serology examination and CMV polymerase chain reaction of liver tissue in infants with cholestasis

5 pesan

Dr. G.N. Lucas <drgnlucas@gmail.com> 9 Maret 2020 pukul 19.38
Kepada: bagus.setyoboedi@fk.unair.ac.id

Dear Bagus Setyoboedi (Corresponding author)
As indicated in the web site of the Sri Lanka Journal of Child Health, it is now necessary for us to have your internationally recognised ORCID ID (ORCID Identification Number) to be included in the manuscript. This number has a format such as **0000-0001-7789-8793**, which is the ORCID ID of Dr. B.J.C. Perera, the other Joint Editor.

Please be kind enough to send us the ORCID IDs of each of the authors.to be inserted into the metadata of the article in the journal web site. In case you do not have this number yet, please go to the website of ORCID (https://orcid.org/register) and register. This registration is free and would take only a couple of minutes.
The article will not be accepted for publication unless the ORCID IDs of all the authors are received.
Regards
Dr G N Lucas
Joint Editor SLJCH
P.S. Please also confirm that you are the corresponding author

BAGUS SETYOBOEDI <bagus.setyoboedi@fk.unair.ac.id> 10 Maret 2020 pukul 15.32
Kepada: rendiskaji@yahoo.com

[Kutipan teks disembunyikan]

BAGUS SETYOBOEDI <bagus.setyoboedi@fk.unair.ac.id> 11 Maret 2020 pukul 22.09
Kepada: "Dr. G.N. Lucas" <drgnlucas@gmail.com>

Dear

Dr G N Lucas
Joint Editor SLJCH

Here the orchid number of authors in the paper with the title :

The Agreement of CMV Serology Examination And CMV PCR of Liver Tissue in Infant With Cholestasis

Bagus Setyoboedi https://orcid.org/0000-0002-3923-6913 (corresponding author)
Reny Widayanti https://orcid.org/0000-0002-7126-6020
Sjamsul Arief https://orcid.org/0000-0002-6372-2460
Dwiyanti Puspitasar https://orcid.org/0000-0003-1773-4791
Rendi Aji Prihaningtyas https://orcid.org/0000-0002-7582-7892

Thank you
Hopefully our manuscript can be accepted in your journal

Best regards
Bagus Setyoboedi
[Kutipan teks disembunyikan]

Dr. G.N. Lucas <drgnlucas@gmail.com> 12 Maret 2020 pukul 10.26
Kepada: BAGUS SETYOBOEDI <bagus.setyoboedi@fk.unair.ac.id>

Thanks. A final decision on your article will be made at the next Editorial Board Meeting on 20 March
Regards
Dr Lucas
[Kutipan teks disembunyikan]

BAGUS SETYOBOEDI <bagus.setyoboedi@fk.unair.ac.id> 12 Maret 2020 pukul 10.33
Kepada: rendiskaji@yahoo.com

---------- Forwarded message ---------
From: **Dr. G.N. Lucas** <drgnlucas@gmail.com>
[Kutipan teks disembunyikan]
[Kutipan teks disembunyikan]

BAGUS SETYOBOEDI <bagus.setyoboedi@fk.unair.ac.id>

The agreement of cytomegalovirus (CMV) serology examination and CMV polymerase chain reaction of liver tissue in infants with cholestasis

16 pesan

Dr. G.N. Lucas <drgnlucas@gmail.com> 20 Maret 2020 pukul 15.26
Kepada: BAGUS SETYOBOEDI <bagus.setyoboedi@fk.unair.ac.id>

Dear Dr. Setyoboedi
Your original article"The agreement of cytomegalovirus (CMV) serology examination and CMV polymerase chain reaction of liver tissue in infants with cholestasis" has been accepted for publication in the Sri Lanka Journal of Child Health. The revised version is attached. If you wish to make any changes, please highlight the changes and e-mail it back to me.
Regards
Dr. G N Lucas
Joint Editor SLJCH

Original Article - The agreement of CMV serology examination and CMV PCR of liver tissue in infants with cholestasis.docx
128K

BAGUS SETYOBOEDI <bagus.setyoboedi@fk.unair.ac.id> 20 Maret 2020 pukul 15.56
Kepada: rendiskaji@yahoo.com

[Kutipan teks disembunyikan]

Original Article - The agreement of CMV serology examination and CMV PCR of liver tissue in infants with cholestasis.docx
128K

Dr. G.N. Lucas <drgnlucas@gmail.com> 23 Maret 2020 pukul 09.34
Kepada: BAGUS SETYOBOEDI <bagus.setyoboedi@fk.unair.ac.id>, reny@yahoo.com, sjamsul.arief@yahoo.com, yanti@dr.com, rendiskaji@yahoo.com

Dear All
I have had no response to my e-mail sent on 20th March. Please respond
Regards
Dr. G N Lucas
Joint Editor SLJCH

---------- Forwarded message ---------
From: **Dr. G.N. Lucas** <drgnlucas@gmail.com>
[Kutipan teks disembunyikan]
[Kutipan teks disembunyikan]

Original Article - The agreement of CMV serology examination and CMV PCR of liver tissue in infants with cholestasis.docx
128K

BAGUS SETYOBOEDI <bagus.setyoboedi@fk.unair.ac.id> 23 Maret 2020 pukul 09.36
Kepada: "Dr. G.N. Lucas" <drgnlucas@gmail.com>
Cc: reny@yahoo.com, sjamsul.arief@yahoo.com, yanti@dr.com, rendiskaji@yahoo.com

Yes, I accept.
[Kutipan teks disembunyikan]

Mail Delivery Subsystem <mailer-daemon@googlemail.com> 23 Maret 2020 pukul 09.37
Kepada: bagus.setyoboedi@fk.unair.ac.id

Alamat tidak dapat ditemukan

Pesan Anda tidak terkirim ke **reny@yahoo.com** karena alamat tersebut tidak dapat ditemukan, atau tidak bisa menerima email.

Tanggapan dari server jarak jauh adalah:

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Final-Recipient: rfc822; reny@yahoo.com
Action: failed
Status: 5.0.0
Remote-MTA: dns; mta5.am0.yahoodns.net. (98.136.96.77, the server for the domain yahoo.com.)
Diagnostic-Code: smtp; 554 delivery error: dd Sorry, your message to reny@yahoo.com cannot be delivered. This mailbox is disabled (554.30). - mta4460.mail.ne1.yahoo.com
Last-Attempt-Date: Sun, 22 Mar 2020 19:37:09 -0700 (PDT)

---------- Pesan Yang Diteruskan ----------
From: BAGUS SETYOBOEDI <bagus.setyoboedi@fk.unair.ac.id>
To: "Dr. G.N. Lucas" <drgnlucas@gmail.com>
Cc: reny@yahoo.com, sjamsul.arief@yahoo.com, yanti@dr.com, rendiskaji@yahoo.com
Bcc:
Date: Mon, 23 Mar 2020 09:36:53 +0700
Subject: Re: The agreement of cytomegalovirus (CMV) serology examination and CMV polymerase chain reaction of liver tissue in infants with cholestasis
Yes, I accept.

On Mon, Mar 23, 2020, 09:34 Dr. G.N. Lucas <drgnlucas@gmail.com> wrote:

> Dear All
> I have had no response to my e-mail sent on 20th March. Please respond
> Regards
> Dr. G N Lucas
> Joint Editor SLJCH
>
> ---------- Forwarded message ---------
> From: **Dr. G.N. Lucas** <drgnlucas@gmail.com>
> Date: Fri, 20 Mar 2020 at 13:56
> Subject: The agreement of cytomegalovirus (CMV) serology examination and CMV polymerase chain reaction of liver tissue in infants with cholestasis
> To: BAGUS SETYOBOEDI <bagus.setyoboedi@fk.unair.ac.id>
>
> Dear Dr. Setyoboedi
> Your original article"The agreement of cytomegalovirus (CMV) serology examination and CMV polymerase chain reaction of liver tissue in infants with cholestasis" has been accepted for publication in the Sri Lanka Journal of Child Health. The revised version is attached. If you wish to make any changes, please highlight the changes and e-mail it back to me.
> Regards
> Dr. G N Lucas
> Joint Editor SLJCH

BAGUS SETYOBOEDI <bagus.setyoboedi@fk.unair.ac.id> 23 Maret 2020 pukul 09.37
Draf

[Kutipan teks disembunyikan]

Original Article - The agreement of CMV serology examination and CMV PCR of liver tissue in infants with

cholestasis.docx
128K

Mail Delivery Subsystem <mailer-daemon@googlemail.com> 23 Maret 2020 pukul 09.37
Kepada: bagus.setyoboedi@fk.unair.ac.id

Alamat tidak dapat ditemukan

Pesan Anda tidak terkirim ke **sjamsul.arief@yahoo.com** karena alamat tersebut tidak dapat ditemukan, atau tidak bisa menerima email.

Tanggapan dari server jarak jauh adalah:

```
554 delivery error: dd Not a valid recipient - atlas302.free.mail.gq1.yahoo.com
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Final-Recipient: rfc822; sjamsul.arief@yahoo.com
Action: failed
Status: 5.0.0
Remote-MTA: dns; mta6.am0.yahoodns.net. (67.195.228.106, the server for the domain yahoo.com.)
Diagnostic-Code: smtp; 554 delivery error: dd Not a valid recipient - atlas302.free.mail.gq1.yahoo.com
Last-Attempt-Date: Sun, 22 Mar 2020 19:37:11 -0700 (PDT)

---------- Pesan Yang Diteruskan ----------
From: BAGUS SETYOBOEDI <bagus.setyoboedi@fk.unair.ac.id>
To: "Dr. G.N. Lucas" <drgnlucas@gmail.com>
Cc: reny@yahoo.com, sjamsul.arief@yahoo.com, yanti@dr.com, rendiskaji@yahoo.com
Bcc:
Date: Mon, 23 Mar 2020 09:36:53 +0700
Subject: Re: The agreement of cytomegalovirus (CMV) serology examination and CMV polymerase chain reaction of liver tissue in infants with cholestasis
Yes, I accept.

On Mon, Mar 23, 2020, 09:34 Dr. G.N. Lucas <drgnlucas@gmail.com> wrote:

> Dear All
> I have had no response to my e-mail sent on 20th March. Please respond
> Regards
> Dr. G N Lucas
> Joint Editor SLJCH
>
> ---------- Forwarded message ---------
> From: **Dr. G.N. Lucas** <drgnlucas@gmail.com>
> Date: Fri, 20 Mar 2020 at 13:56
> Subject: The agreement of cytomegalovirus (CMV) serology examination and CMV polymerase chain reaction of liver tissue in infants with cholestasis
> To: BAGUS SETYOBOEDI <bagus.setyoboedi@fk.unair.ac.id>
>
> Dear Dr. Setyoboedi
> Your original article"The agreement of cytomegalovirus (CMV) serology examination and CMV polymerase chain reaction of liver tissue in infants with cholestasis" has been accepted for publication in the Sri Lanka Journal of Child Health. The revised version is attached. If you wish to make any changes, please highlight the changes and e-mail it back to me.
> Regards
> Dr. G N Lucas
> Joint Editor SLJCH

BAGUS SETYOBOEDI <bagus.setyoboedi@fk.unair.ac.id> 23 Maret 2020 pukul 09.37
Kepada: rendiskaji@yahoo.com

---------- Forwarded message ---------
From: **Dr. G.N. Lucas** <drgnlucas@gmail.com>
Date: Mon, Mar 23, 2020, 09:34
Subject: Fwd: The agreement of cytomegalovirus (CMV) serology examination and CMV polymerase chain reaction of liver tissue in infants with cholestasis
To: BAGUS SETYOBOEDI <bagus.setyoboedi@fk.unair.ac.id>, <reny@yahoo.com>, <sjamsul.arief@yahoo.com>, <yanti@dr.com>, <rendiskaji@yahoo.com>

[Kutipan teks disembunyikan]

Original Article - The agreement of CMV serology examination and CMV PCR of liver tissue in infants with cholestasis.docx
128K

BAGUS SETYOBOEDI <bagus.setyoboedi@fk.unair.ac.id> 23 Maret 2020 pukul 09.48
Kepada: rendiskaji@yahoo.com

---------- Forwarded message ---------
From: **Dr. G.N. Lucas** <drgnlucas@gmail.com>
Date: Mon, Mar 23, 2020, 09:34
Subject: Fwd: The agreement of cytomegalovirus (CMV) serology examination and CMV polymerase chain reaction of liver tissue in infants with cholestasis
To: BAGUS SETYOBOEDI <bagus.setyoboedi@fk.unair.ac.id>, <reny@yahoo.com>, <sjamsul.arief@yahoo.com>, <yanti@dr.com>, <rendiskaji@yahoo.com>

[Kutipan teks disembunyikan]

Original Article - The agreement of CMV serology examination and CMV PCR of liver tissue in infants with cholestasis.docx
128K

BAGUS SETYOBOEDI <bagus.setyoboedi@fk.unair.ac.id> 23 Maret 2020 pukul 09.58
Kepada: "Dr. G.N. Lucas" <drgnlucas@gmail.com>

Dear

Dr G N Lucas
Joint Editor SLJCH

Here the revision of paper with title: **Agreement of CMV Serology Examination And CMV PCR of Liver Tissue in Infant With Cholestasis**

Thank you
Hopefully our manuscript can be published in your journal

Best regards
Bagus Setyoboedi

On Mon, Mar 23, 2020, 09:34 Dr. G.N. Lucas <drgnlucas@gmail.com> wrote:
[Kutipan teks disembunyikan]

Original Article - The agreement of CMV serology examination and CMV PCR of liver tissue infants cholestasis.docx
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BAGUS SETYOBOEDI <bagus.setyoboedi@fk.unair.ac.id> 23 Maret 2020 pukul 10.18
Kepada: rendiskaji@yahoo.com

[Kutipan teks disembunyikan]

Original Article - The agreement of CMV serology examination and CMV PCR of liver tissue infants cholestasis.docx
129K

Dr. G.N. Lucas <drgnlucas@gmail.com> 23 Maret 2020 pukul 10.36
Kepada: BAGUS SETYOBOEDI <bagus.setyoboedi@fk.unair.ac.id>

I have corrected it. The article is scheduled to be published in the June 2021 issue.
Regards
Dr Lucas
[Kutipan teks disembunyikan]

BAGUS SETYOBOEDI <bagus.setyoboedi@fk.unair.ac.id> 23 Maret 2020 pukul 11.37
Kepada: rendiskaji@yahoo.com

[Kutipan teks disembunyikan]

BAGUS SETYOBOEDI <bagus.setyoboedi@fk.unair.ac.id> 24 Maret 2020 pukul 09.02
Kepada: "Dr. G.N. Lucas" <drgnlucas@gmail.com>

Dear

Dr G N Lucas
Joint Editor SLJCH

First off all I want to say thank you that my paper with title Agreement of CMV Serology Examination and CMV PCR of Liver Tissue in Infant with Cholestasis accepted and plan to published in your journal. For my academic administration, would you mind to give me the Letter of Acceptance (LOA) first.

Best regards
Bagus Setyoboedi
[Kutipan teks disembunyikan]

Dr. G.N. Lucas <drgnlucas@gmail.com> 24 Maret 2020 pukul 09.43
Kepada: BAGUS SETYOBOEDI <bagus.setyoboedi@fk.unair.ac.id>

The letter is attached
Dr Lucas
[Kutipan teks disembunyikan]

SLJCH - New Letterhead - Dr. Bagus Setyoboedi.pdf
95K

BAGUS SETYOBOEDI <bagus.setyoboedi@fk.unair.ac.id> 24 Maret 2020 pukul 09.51
Kepada: rendiskaji@yahoo.com

[Kutipan teks disembunyikan]

SLJCH - New Letterhead - Dr. Bagus Setyoboedi.pdf
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