**RESPONSES TO THE REVIEWER’S COMMENTS**

We answer to the reviewer’s comments as follows

Reviewer 1(biostatistician)

C: Tables need some modifications to make data self-explanatory and exhibit predictors of KAP.  
Good job, but it needs some modifications, as highlighted in the manuscript.

*R/ We answer the reviewer’s comment : In accordance with the reviewer's comment, we added a table with the overall KAP score of the study population. See our revised manuscript page 12, table VI.*  
Reviewer 2

C1 : Abstract: -  
Hepatitis B virus (HBV) or C virus (HCV) infection: -Both of them are a significant problem, so it was better to say instead of OR

R1/ *We answer the reviewer’s comment 1: The sentence has been changed according to the reviewer’s suggestion. See our revised abstract.*

C2: Introduction: -  
1- They have been the seventh leading cause of death worldwide. The complications of HCV and HBV may be the 7th cause of death worldwide, not HCV and HBV.

R1/ *We answer the reviewer’s comment 2: We completed the sentence according to the reviewer’s suggestion. See our revised manuscript page 3 line 63*  
2- References in the manuscript should be written as numbers, e.g. [1], and the details will be mentioned in the reference section.

R2/ *We answer the reviewer’s comment 2: References have been presented according to the reviewer’s suggestion. See our revised manuscript.*  
3- Punctuation marks should be revised‎

R3/ *We answer the reviewer’s comment 3: We revised the punctuation marks according to the reviewer’s proposal.*

Reviewer 3

The authors discussed the KAP of Congolese patients in Lubumbashi ward HBV, HCV. The work looks interesting, especially from the public health point of view. However, we have some comments that would improve the quality of the work:  
A- In the study design:  
C1: The main concern is the possibility of selection bias. It should be clearly explained how the sample size was calculated and the methods of selection

R1/ *We answer the reviewer’s comment 1: The sample size was determined using the single-population proportion formula based on the previous prevalence of participants who had correct knowledge and practice about HBV infection in Vietnam, estimated to at 50% [Pham et al, 2019]. The calculated minimum sample size was 369 but the effective sample size in the frame of this study was 704 participants. See our revised manuscript page 4 line104 to 107.*  
C2: The questionnaire should be tested before circulating to be sure it is accepted and can be handled among persons with a low level of education and health culture

R2/ *We answer the reviewer’s comment 2: The questionnaire has been tested before distributing among the population to be sure that it’s accepted. That’s the reason why we used pre-tested structured questionnaire printed on paper as well as electronically using the Software: SurveyMonkey® - SurveyMonkey.com. See our revised manuscript page 4 line109 to 115.*  
C3: Some other comments in the attached word file

R3/ *We answer the reviewer’s comment 3:* *We have taken into account the comments of the reviewer. See our revised manuscript.*  
B- In the writing style  
C4: Some language comments are shown in the attached word file

R4/ *We answer the reviewer’s comment 4:* *The reviewer comments showed in the word attachment have been taken into account. See our revised manuscript.*

Reviewer 4

1) Many grammar and editing errors ----- I highlighted some in the manuscript e.g.  
of the participants did not have good -------had bad  
were---- being  
survey was ----were  
towards---toward  
\*They have been the seventh leading cause of death in the world-------------------They have been the world's seventh leading cause of death  
\*-negative for ---------negative practice with  
\*considered as low -------considered low  
\*involvement to ---------involvement in

R/ *We answer the reviewer’s comment 1: We changed the grammatical errors according to the reviewer’s proposals. See our revised manuscript.*  
2) At the abstract  
\*to determine the level of knowledge, attitudes, and behavior of ------ should be Knowledge, Attitudes, and Practices

R/ *We answer the reviewer’s comment 2: behavior has been changed to practices as suggested by the reviewer. See our revised abstract page 2 line 34.*  
\*towards HBV or HCV----- and not or

R/ *We answer the reviewer’s comment 2: HBV or HCV has been changed to HBV and HCV. See our revised abstract page 2 line 35, 53; page 3 line 95.*  
\* A total of 704 participants, including 478 men and 226 women ----- in the methodology better to add the selection criteria ( We targeted all people of both sexes and ages) while the number of males and females should be placed in the results.

R/ *We answer the reviewer’s comment 2: We changed this part of abstract according to the reviewer’s proposal. See our revised abstract page 2 line 38.*  
\* both a structured online and physical questionnaire------ should be online and printed or paper questionnaires

R/ *We answer the reviewer’s comment 2: Reviewer comment has been considered. See our revised abstract page 2 line 39 to 40.*

\* Knowledge about HBV and/or HCV in the Congolese population living in Lubumbashi has proven incomplete. Similarly, the attitudes and practices of the population towards these infections were limited ---------------- what is the definition of insufficient (unclear term )  
while in the final conclusion,( The overall knowledge of the participants was found to be insufficient. Their attitude and practice were also limited)

R/ *We answer the reviewer’s comment 2: In this study we divided the participants in two groups: the participants who had good knowledge or practice and those who had bad knowledge or practice. Regarding the attitudes we divided also the participants in two groups: the participants with positive attitude and those with negative attitude. See our revised manuscript page 4 line 118 to 129; page 5 line 130 to 135.*  
\*HBV and/or HCV using the abbreviations should be preceded by the full name first.  
\*Keywords: Knowledge, attitudes, practices, Hepatitis, DRC.------- keyword bold  
DRC ----no abbreviations in the keywords better placed Democratic Republic of Congo (DRC).

R/ *We answer the reviewer’s comment 2: When mentioned for the first time in the manuscript HBV and HCV are preceded by the full name. See our revised abstract page 2 line 31.*

*The keyword has been bolded, and the abbreviation DRC has been replaced by Lubumbashi. See our revised abstract page 2 line 56.*

3) at the introduction  
\* The introduction should be divided into paragraphs  
\*all the references in the manuscript et al, ------et al.,  
\* The most critical transmitted ------- significant infection  
\*hepatitis B infections and/or C.-------- B and C infections.

R/ *We answer the reviewer’s comment 3: The introduction has been divided into paragraphs. References have been presented according to the editor’s instructions to authors. The remaining comments have been considered according to the reviewer’s proposals. See our revised manuscript page 3 line 63 to 95.*

4) The methodology  
\*Site, type, and --------setting , design ,and  
\*Evaluated parameters ----- would be placed under the Tools and Data collection technique  
\*attitudes who answered more than 70% of the attitude-related questions related to HBV and HCV was considered to have a positive attitude. A participant who answered less than 70% o--------------------- what about the 70%?  
better to be classified into three groups (bad, average, good)  
to be more informative  
\*Practice ---- It was a question of knowing here the reasons for which the participants practice prevention or control of contamination of HBV and HCV----- unclear sentences  
\* add the questions of (knowledge, Attitudes, and Practices) --- and the reference of these questions.  
\* results :  
age (y) ----------------------------  
[18 - 25] 18-<25  
[26 - 40] 25-<40

[41 - 55] 40- <55  
\* p-value ------p italic  
\*\* 0,03 - 0,00 -0,12-0,09--5,6 ± 1,5 -------- replace (,) with ( .)  
\*Divorced 0 0 0 0  
\* add the total score, and the classification of KAP in tables II , III, iv,

R/ *We answer the reviewer’s comment 4: The reviewer’s comments have been taken into account. In this study we didn’t find the divorced participants. All participants were either single or married. See our revised manuscript page 11 table V.*

*In accordance with the reviewer's comment, we added a table with the overall KAP score of the study population. See our revised manuscript page 12, table VI.*  
4) The discussion should be divided into paragraphs

R/ *We answer the reviewer’s comment 4: The discussion section of the manuscript has been divided into paragraphs. See our revised manuscript page 13 line 291 to 323; page 14 line 324 to 351.*  
5) add a list of abbreviations  
R/ *We answer the reviewer’s comment 5: The list of abbreviations has been added in the manuscript. See our revised manuscript page 15 line 369 to 377.*  
6) An extensive health education campaign should be provided to the general population to raise awareness about viral hepatitis. Therefore, public health interventions aimed at improving mass screening practices for HBV and HCV are needed------------should be placed at the recommendation

R/ *We answer the reviewer’s comment 6: The reviewer’s comment has been taken into account. See our revised manuscript page 13 line 358 to 368.*  
7) The references should be arranged in alphabetical order, not numbers

R/ *We answer the reviewer’s comment 7: The references have been presented according to the editor instructions to authors. See our revised manuscript page 16 line 393 to 420; page 17 line 421 to 446.*

Reviewer 5

It is an exciting study discussing a significant health problem  
1- Table 11 shows diarrhea and constipation, not symptoms of HBV or HCV. Patients always have flu-like symptoms followed by jaundice or not.

R/ *We answer the reviewer’s comment 1: These symptoms are related to cases of HBV or HVC coinfection with HIV. See our revised manuscript page 3 line 83 to 86.*2- In table III: the question Do you have hepatitis B and/or C? 699 participants answered no  
And in table IV the question, have you ever been tested for hepatitis B and/or C viruses? 618 participants were not tested, so the first question needs to be changed to do you have symptoms of hepatitis B and/or C?

R/ *We answer the reviewer’s comment 2: The reviewer’s comment has been taken into account. See our revised manuscript page 9 table III.*