

PEER-REVIEW REPORT

Name of journal: *World Journal of Gastroenterology*

Manuscript NO: 91825

Title: Disease clearance in ulcerative colitis: A new therapeutic target for the future

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 04091850

Position: Editorial Board

Academic degree: DSc, MD, PhD

Professional title: Chief Doctor, Professor

Reviewer's Country/Territory: Denmark

Author's Country/Territory: United States

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Reviewer chosen by: AI Technique

Reviewer accepted review: 2024-01-29 07:06

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Review time: 7 Days and 11 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation

Scientific significance of the conclusion in this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

In order to improve treatment and control of patients suffering from ulcerative colitis a thorough discussion of treatment outcomes is of relevance. By providing a review regarding the concept of disease clearance the authors of the present manuscript do so. For that reason the paper is highly relevant for the readers. However some issues should be dealt with before the manuscript is ready for publication. First of all the quality of the language is surprisingly uneven through the manuscript. A thorough correcture reading by an expert in english is recommended. Specific points: Abstract: What is meant by "experimental platforms for ulcerative colitis"? Introduction: "colonic inflammation in the rectum" should read "chronic inflammation..." An incidence rate is normally given as the number of new cases/100.000/year. It cannot be given as "20% of caees". Just write the actual incidence rate. Pharmacoeconomic data is provided. This is of value but the information should be placed after the sentence describing the increasing disase and economic burden. "higher biologic needs" does not make sense. Should be "higher needs for biologics" I think I know what is meant by "sub-therapeutic agents" but it should simply be named "Due to the availability of only less potent drugs" It can be debated



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whether Janus kinase inhibitors can be considered to be safe. The manuscript is providing some evidence for the value of disease clearance. For that reason the sentence "The impact of achieving simultaneous clinical, endoscopic and histological remission on disease outcomes remains limited" is obviously wrong. Disease clearance in ulcerative colitis: The inflammation in Crohn's disease is transmural. This is not the case in ulcerative colitis. The present manuscript deals with UC and the data regarding Crohn's disease and the value of transmural healing is out of context and shouldn't be included. Why incorporate disease clearance in ulcerative colitis ? "Non-inflammatory colonic alterations" should be defined. "Clinically silent patients" should read "Patients in clinical remission" "Histologic healing is associated with a threefold increase in CRC risk" This is definitely not true. Evidence supporting disease clearance in ulcerative colitis - I would suggest to add "as a therapeutic target": "This underlines the importance of initiating early treatment" I agree but it should be added that it also underlines the need for the development of more efficient drugs. Future avenues and utility in clinical landscape: It is stated that dual therapy can increase the likelihood of achieving DC. This may be so but it has not been proven. The literature is scarce on the value of dual therapy which should be pointed out. I think the figures are too simple and they do not add much to the understanding of the message of the manuscript. The figures can be omitted.