

Reviewed by 00058448

This is an excellent article with detailed review of recent literature regarding medications on the risk of perforated diverticular disease. I will like to recommend to accept this article.

Thanks for the compliments. We appreciate the reviewer has favoured the article.

Reviewed by 02455429

In this review paper, Gravante and Yahia analyze the role of the common medications on the risk of perforation from diverticular disease. The paper is well-written, the argument is thoroughly examined, and sections are clearly separated. However, this reviewer has the following concerns: 1) The paper addresses only untreated diverticular disease, and this should be commented upon in the text

We modified it throughout the text according to the suggestions. As some patients are even unaware of the presence of diverticular disease until the perforation happens, the disease is usually untreated at the time of the drug administration.

2) The reader should be helped in retaining the concepts expressed by adding tables and/or figures to the paper.

Thanks for the suggestion. We have added Table 1 in the article.

Reviewed by 00038714

1. This article is not in the style of an editorial.

We have written the article according to the WJG guidelines for an editorial and similarly to previous editorials accepted and published by WJG from the same Author (Gravante G).

2. The authors make unjustified conclusions. For example, in rheumatoid arthritis, perhaps the reason why diverticular perforation is more prevalent is secondary to an underlying collagen/vascular disorder rather than directly due to effects of medications.

We removed the following sentences or part of sentences from the article and left only the objective data presented in the references cited.

” probably because of the side-effects of the antirheumatic medications”

“It is also possible that data generated directly by hospital-based databases can be easily checked and corrected during the analysis process that cannot be done easily in the local General Practitioner practices. “

3. The manuscript is poorly written and has spelling errors.

We corrected the spelling errors throughout the text and reviewed the grammar.

This article could be improved by making it a systematic review. It is more of a descriptive review article and lacks originality.

In the Authors' personal experience there have been cases of diverticular disease, sometimes still undiagnosed, that manifested with catastrophic perforations and in which the only precipitating

factor was the new administration of one of the drugs listed in our article. With regards to the originality, we found some retrospective studies (all included and discussed in the editorial) but no previous discussions on this issue and a general lack of awareness among the colleagues for the effects of such medications on the diverticular bowel. It is our intention to draw the attention of the clinicians on this common but potentially dangerous side effect in order to 1) balance properly the advantages/disadvantages of administering such drugs in patients with known diverticular disease, 2) warn the patients for any early signs or symptoms of diverticulitis and 3) perform a prompt diagnosis in eventual cases of perforations. The applicability of our discussion is wide due to the high prevalence of the disease and of the drugs administered, ranging from large university hospitals to remote peripheral district hospitals. It is not our intention to present the article in a systematic review because we wanted to pursue a more personal and conversational approach in the presentation of the text.

Reviewed by 00040472

The case for complicated diverticular disease is very much overstated. Arguments need to be balanced against therapeutic value of drugs including protective effects of NSAIDS against colorectal cancer.

It is obviously not our intention to question the validity of drugs used by thousands of healthcare professionals world-wide such as NSAIDs, opioids or steroids with regards to pain control, immunosuppression, protective effects towards other diseases and so on. The validity of these classes of drugs for the prevention and treatment of various diseases or symptoms is well-known and has been proved by numerous articles, million of patients treated and decades of clinical experience. The case for this article is to discuss some clinical implications of these drugs which are usually ignored so that the average reader coming across our editorial could balance the advantages or disadvantages for their use, make a more accurate decision and eventually diagnose this severe complication promptly if it happens.