

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 37265

Title: High Prevalence of Cholestasis, With Increased Conjugated Bile Acids, in IBD Patients

Reviewer's code: 00742373

Reviewer's country: United States

Science editor: Xue-Jiao Wang

Date sent for review: 2018-01-09

Date reviewed: 2018-01-09

Review time: 10 Hours

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

The manuscript titled High Prevalence of Cholestasis, With Increased Conjugated Bile Acids, in IBD Patients carried out a retrospective cohort study of the prevalence as well as causes of cholestasis in patients with inflammatory bowel diseases. They found that calcium supplementation was significantly associated with cholestasis, whereas current smoking significantly reduced the risk of cholestasis. Those patients with ileal disease had higher levels of primary, secondary, and tertiary bile acids whereas patients with colonic disease had higher levels of conjugated bile acids. The author concluded that conjugated bile acids are higher in cholestasis indicating a possible role for the liver in pathogenesis. The author also found that smoking appears to reduce cholestasis. As the author mentioned, there is no available data regarding the potential impact of cholestasis on IBD itself. But in cholestasis, the pathways of liposoluble vitamins



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absorption and bile acids metabolism could be influenced by IBD. Since the exact prevalence of cholestasis in IBD remains unknown and because cholestasis may have a profound impact on the disease course, it is important to deeply identify its aetiologies and its clinical relevance. Questions and suggestions: • This is a retrospective cohort study, how to evaluate influence of the length of disease time to the changes of TBA and severity of the disease. • It seems the patients are from different hospitals or clinics all over Switzerland, and the healthcare physicians are different, how the author can be sure the diagnosis is based on the standard. • Is the bile acids measured in different centers? Do they use the same methods to evaluate the TBA? • The author concluded that current smoking status seems to be a protective factor against cholestasis. Which may mislead the risk influence of smoking to human health. As the author mentioned in the discussion, the real reason is that the non-smokers probably have better function in absorbing bile acid from bile duct system and transfer into the circulation.

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 37265

Title: High Prevalence of Cholestasis, With Increased Conjugated Bile Acids, in IBD Patients

Reviewer's code: 00506058

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Science editor: Xue-Jiao Wang

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Review time: 10 Days

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

Reviewer report Manuscript title: " High Prevalence of Cholestasis, With Increased Conjugated Bile Acids, in IBD Patients". This retrospective study aimed to investigate the prevalence of cholestasis in a cohort of patients with inflammatory bowel disease. A high prevalence of cholestasis (high total bile acid level in serum) of about 7% was found. The study identified smoking as a factor that reduces the risk of cholestasis in these patients. In this study new data has been provided as regards cholestasis in patients with inflammatory bowel disease and suggest an intrahepatic origin for this. Comments The conclusions stated at the end of the discussion are better to be also added to the abstract.