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PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 54515

Title: VEDOLIZUMAB FOR ULCERATIVE COLITIS: REAL WORLD OUTCOMES FROM A MULTICENTER OBSERVATIONAL COHORT OF AUSTRALIA AND OXFORD

Reviewer's code: 03261497

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Associate Professor, Senior Postdoctoral Fellow

Reviewer's Country/Territory: Brazil

Author's Country/Territory: Australia

Manuscript submission date: 2020-04-04

Reviewer chosen by: AI Technique

Reviewer accepted review: 2020-04-08 15:34

Reviewer performed review: 2020-04-09 15:16

Review time: 23 Hours

Scientific quality	<input checked="" type="checkbox"/> Grade A: Excellent <input 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 Grade E: Do not publish
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 checked="" type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous



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statements

Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

This is a well done retrospective study from two different countries with different strategies of treatment, as demonstrated by more common use of immunomodulators in Australia. The importance of this fact is discussed but without final conclusions at the moment. Predictors of response were also verified and this study mainly demonstrated that AntiTNF previous exposition can impair a long term remission and increase the failure to treatment with VEDO. These observations are important and can impact the clinical practice , concerning the choice of the biological to be used for the treatment of UC. Interestingly, regardless of the cause of anti-TNF failure, the outcome with the use of VEDO was similar. The limitations were well discussed but I would like to see in this article a comparison of long term remission with infliximab, an Anti TNF with more efficacy than adalimumab to treat moderate to severe UC. The conclusions appropriately summarize the data that this study provided. The authors demonstrated that some of unexplained results justify carrying out new studies, preferably prospective.