

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 56210

**Title:** Diagnosis and treatment of iron-deficiency anemia in gastrointestinal bleeding: A systematic review

**Reviewer's code:** 03782335

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

**Reviewer's Country/Territory:** Kosovo

**Author's Country/Territory:** Portugal

**Manuscript submission date:** 2020-06-01

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2020-06-01 20:20

**Reviewer performed review:** 2020-06-09 12:34

**Review time:** 7 Days and 16 Hours

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 Grade E: Do not publish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



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## **SPECIFIC COMMENTS TO AUTHORS**

Authors of the systematic review entitled Diagnosis and treatment of iron-deficiency anemia in gastrointestinal bleeding: A systematic review have developed recommendations regarding one of the most common health issues observed in the field of gastroenterology. This is an important work which should be helpful for clinicians (gastroenterologists and other fields of internal medicine) in their everyday work with patients. Still, there are certain issues which I would like to be addressed by authors: -Major points: 1. Authors should explain more clearly why is there a need for a standalone guideline for diagnosis and treatment of IDA in GI bleeding as there are for example for anemia in chronic kidney disease. Also, is there a need for this guideline when one takes into account the already existing general guidelines for diagnosis and treatment of IDA, and how do they differ from recommendations proposed by the authors of this manuscript. 2. The coexistence of IDA and anemia caused by inflammation is a challenge for clinicians during differential diagnosis. Authors suggest the use of CRP levels to distinguish between 2 forms of anemia, but CRP is not an ideal indicators for this use, especially since anemia caused by inflammation can occur due to acute and chronic conditions. WHO publications (The interpretation of indicators of iron status during an acute phase response and Serum transferrin receptor levels for the assessment of iron status and iron deficiency in populations) suggest that sTFR or  $\log(\text{sTFR}/\text{ferritin})$  ratio may help in this direction, although there are shortcomings in the use of sTFR as well. Still, role of sTFR should be discussed in the context of IDA vs anemia of inflammation and when both are present in a patient. Additional references regarding this issue can be read from Shin et al. "Utility of access soluble transferrin receptor (sTFR) and sTFR/ $\log$  ferritin index in diagnosing iron deficiency anemia", Infusino et al. "Soluble transferrin receptor (sTFR) and sTFR/ $\log$  ferritin index for the



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diagnosis of iron-deficiency anemia a meta-analysis", Koulaouzidis et al. "Soluble transferrin receptors and iron deficiency, a step beyond ferritin. A systematic review". 3.

Figure 2 does not address the scenario what to do when oral iron therapy results with poor achievement of treatment targets (which occurs for example in IDA during GI bleeding accompanied with heart failure). 4. A table which details the pharmacological characteristics of oral and IV iron preparations, their advantages and disadvantages should be added. -Minor issue: 5. Authors have not discussed the potential role of ascorbic acid in increasing iron absorption. Role of ascorbic acid is discussed in "Joint recommendations on management of anaemia in patients with gastrointestinal bleeding in Hong Kong" and "Guidelines for the management of iron deficiency anaemia from British Society of Gastroenterology". For further recent details please consult "Iron deficiency anemia: A comprehensive review on iron absorption, bioavailability and emerging food fortification approaches" by Shubham et al.

## RE-REVIEW REPORT OF REVISED MANUSCRIPT

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**Reviewer performed review:** 2020-09-03 10:49

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<b>Scientific quality</b>	<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
<b>Language quality</b>	<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
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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Authors of the systematic review entitled “Diagnosis and treatment of iron-deficiency anemia in gastrointestinal bleeding: A systematic review” should be commended for their corrections during the process of revision of the manuscript. I am glad to see that the authors have included all the necessary corrections, new data and explanations in the revised version of the manuscript. Therefore, I recommend that this manuscript be accepted for publication.