



## PEER-REVIEW REPORT

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

**Manuscript NO:** 57658

**Title:** Dynamic Contrast-enhanced MR Imaging and Diffusion-weighted Imaging in the Activity Staging of Crohn's Disease in the Terminal Ileum of the Small Bowel

**Reviewer's code:** 00043116

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Associate Professor, Doctor

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

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

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**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2020-06-19 15:25

**Reviewer performed review:** 2020-06-24 03:21

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<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" 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 Grade E: Do not publish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 checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" 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**

Manuscript NO: 57658 Dynamic Contrast-enhanced MR Imaging and Diffusion-weighted Imaging in the Activity Staging of Crohn's Disease in the Terminal Ileum of the Small Bowel Summary: Authors evaluate the value of DCE-MRI and DWI in assessing Crohn's disease (CD) activity in the terminal ileum. Forty-eight patients with CD who underwent DCE-MRI and DWI were retrospectively investigated.  $K_{trans}$ ,  $K_{ep}$ ,  $V_e$ , and ADC were calculated, and compared between CD lesion of the terminal ileum and the normal ileal loop (NIL). DCE-MRI and DWI parameters were significantly different between CD lesion and the normal lesion, and combining DCE-MRI parameters and ADC could differentiate inactive CD from active CD with an AUC of 0.95, which was better than MaRIA. Comments: This is an interesting study evaluating the value of DCE-MRI and DWI in assessing Crohn's disease (CD) activity. I understood that combining DCE-MRI parameters and ADC would be of use to differentiate inactive CD from active CD, but I couldn't understand how they combine information of DCE-MRI parameters and ADC. 1. Abstract. Is MRE common? Didn't it need to write "magnetic resonance enterography" before using "MRE"? 2. Results. Authors wrote that the highest AUC was observed when DCE-MRI and DWI parameters were combined ( $K_{trans}+K_{ep}+V_e+ADC$ ), with an observed AUC of 0.95. But we could not understand how those parameters were combined. Just add values? Probably no? 3. Discussion section. Authors wrote that the reduced water diffusion was likely related to infiltration of inflammatory cells, dilated lymphatic channels and granuloma development during CD process. I also think that the reduced water diffusion in active CD might be associated with fibrosis due to CD. 4. Just question. Did authors compare DCE-MRI and DWI parameter with pathological activity status of CD?