

PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 82990

Title: Intestinal complications in patients with Crohn's disease in the Brazilian public healthcare system between 2011 and 2020

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03662955

Position: Editorial Board

Academic degree: PhD

Professional title: Chief Physician, Professor

Reviewer's Country/Territory: China

Author's Country/Territory: Brazil

Manuscript submission date: 2023-01-09

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-01-10 10:12

Reviewer performed review: 2023-01-19 12:21

Review time: 9 Days and 2 Hours

Scientific quality	<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 Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation

Scientific significance of the conclusion in this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
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 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
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

This study revealed that CD patients undergoing conventional therapy and eventually anti-tumor necrosis factor therapy seem to present an active and progressive disease, which needs more public attention. Overall the article is well organized and its presentation is good. In addition, the novelty, clinical relevance, and scientific importance are acceptable. However, the grammar, spelling, and sentence structure need to be improved.

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Title: Intestinal complications in patients with Crohn's disease in the Brazilian public healthcare system between 2011 and 2020

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 04718191

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Professor, Surgeon

Reviewer's Country/Territory: China

Author's Country/Territory: Brazil

Manuscript submission date: 2023-01-09

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-02-01 13:15

Reviewer performed review: 2023-02-12 12:59

Review time: 10 Days and 23 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input checked="" type="checkbox"/> Grade D: No novelty
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Scientific significance of the conclusion in this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
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 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
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

The authors described intestinal complications in patients with CD between 2011 and 2020 in the Brazilian public healthcare system and explore intestinal complications in patients who received only CVT or anti-TNF therapy in the same period. I have some comments list below: 1. The authors wanted to focus on intestinal complications of CD, like most published paper mentioned. However, the several most complications and procedures were related to perianal complications. 2. For intestinal complications observation in CD disease course, the mean follow-up duration of 4.44 years was quite short. For patients recieved Anti-TNF, 2.39 years weve even short. 3.The anti-TNF therapy cohort were patients who presented at least one claim of anti-TNF therapy, sometimes patients may have only one claim of therapy because of reasons like allergy to anti-TNF. 4. Four groups/categories of types of ICs in patients with CD were assessed: (1) CD hospitalization-related, (2) procedure-related, (3) associated diseases, and (4) overall (one or more types of ICs). The definition was vague and not exclusive.