



PEER-REVIEW REPORT

Name of journal: *World Journal of Gastrointestinal Pharmacology and Therapeutics*

Manuscript NO: 68923

Title: Hospitalizations and in-hospital mortality for inflammatory bowel disease in Brazil

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03009458

Position: Peer Reviewer

Academic degree: MD

Professional title: Professor

Reviewer's Country/Territory: Spain

Author's Country/Territory: Brazil

Manuscript submission date: 2021-06-08

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-06-08 14:33

Reviewer performed review: 2021-06-09 12:02

Review time: 21 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 Grade E: Do not publish
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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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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
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SPECIFIC COMMENTS TO AUTHORS

TITLE I suggest changing the order of the title: Hospitalizations (first) and in-hospital mortality (second) for inflammatory bowel disease... **ABSTRACT** The abstract has more than 350 words; please check if there is a limit extension for the Journal.

INTRODUCTION SUS abbreviation should be explained the first time it is used in the Introduction section. The final paragraph of the Discussion should only include the aim of the present study. Any other information is better included before in the Introduction, or in the Discussion section. **METHODS** This article aims to describe

the profile of hospitalizations and in-hospital deaths due to IBD in Brazil over 10 years and to analyze in-hospital mortality (IHM) over 20 years. To describe hospitalizations from 2008 to 2018 and to analyze IHM from 1998 to 2017 for IBD in Brazil. The discrepancy in these periods merits a more detailed explanation. Again, it is stated that "Hospitalizations from 1998 to 2007 were not included because not all data were available". Please also explain this limitation. Relevant limitations of the present study,

as the authors correctly acknowledge in the Discussion are that the data analyzed only involved hospitalized patients and did not cover part of the patients cared for by private health insurance; that there was no distinction between CD and UC; and that no data on the reason for admission or procedures performed was available. **RESULTS** Was any

information available on the type of anti-TNF used (infliximab vs. adalimumab/golimumab). This is a relevant issue, as infliximab needs "hospitalization" to be administered. In this way, it is stated (in the Discussion section) that "despite the reduction in the number of hospitalizations in Brazil, total expenditures with hospitalizations for IBD increased by 30% from 2008 to 2018. Perhaps this reflects greater



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access to exams, procedures or even the need for hospitalization for the application of anti-TNF α . DATASUS data do not differentiate 1-day hospitalizations". So perhaps many of the "hospitalizations" could be due, simply, to the infliximab administration? If this is the case, this would need a more detailed analysis. **DISCUSSION** The Discussion section is too long and could be easily shortened. Some comparison/comments regarding the costs in Brazil compared with other countries should be included in the Discussion. Please review the order of the topics in the Discussion section: I suggest dealing first with hospitalizations (including all related topics), and only then deal with in-hospital mortality. **REFERENCES** OK. **TABLES** OK. **FIGURES** OK.