



PEER-REVIEW REPORT

Name of journal: *World Journal of Gastroenterology*

Manuscript NO: 86628

Title: Location-based prediction model for Crohn's disease regarding a novel serological marker, anti-chitinase 3-like 1 autoantibodies

Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 02447059

Position: Editorial Board

Academic degree: BM BCh, MD, MSc, PhD

Professional title: Professor

Reviewer's Country/Territory: Egypt

Author's Country/Territory: Hungary

Manuscript submission date: 2023-06-28

Reviewer chosen by: Geng-Long Liu (Quit 2023)

Reviewer accepted review: 2023-07-29 10:00

Reviewer performed review: 2023-08-03 08:24

Review time: 4 Days and 22 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 Grade E: Do not publish
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 checked="" type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
Language quality	<input checked="" type="checkbox"/> Grade A: Priority publishing <input 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 type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

The authors aimed to investigate anti-CHI3L1 in IBD and its frequency and relation to clinical parameters, severity, and relapse of disease. They recruited 257 Crohn’s disease (CD), 180 ulcerative colitis (UC) patients, and 86 healthy controls. They detected anti-CHI3L1 by in-house ELISA. They found that sIgA subtype aCHI3L1 positivity was higher in both CD and UC patients than in HCONT and the presence of both IgA and sIgA aCHI3L1 antibodies was associated with colonic involvement in patients with CD. They concluded that CHI3L1 is a novel neutrophil autoantigenic target in IBD. The consideration of antibody classes along with location-based prediction may transform the future of serology in IBD. They also discussed its potential as a therapeutic target. The study is very interesting and very important in the field, well-designed and well-written. But few concerns were raised during revision. Comments: 1. The title feels more as philosophical. 2. Figure 2 footnote is very confusing. Please present in a simpler way 3. association between the antibody status and clinical or endoscopic disease activity and duration need to be presented even as supplementary. 4. Table 4, Why there is no testing correlation between anti-CHI3L1 and Anti-GP2 IgA and



**Baishideng
Publishing
Group**

7041 Koll Center Parkway, Suite
160, Pleasanton, CA 94566, USA
Telephone: +1-925-399-1568
E-mail: bpgoffice@wjgnet.com
https://www.wjgnet.com

complicated disease behaviour? 5. Table 5, though important, is difficult to follow. 6. Cox regression description need to be transferred from results section to methodology section. 7. The relation to anti-CHI3L1 negativity to treatment type need to be addressed. 8. The change of anti-CHI3L1 to positivity or to negativity during follow up period need to be explained. 9. Discussion is long and narrative. It needs to be more focused.



PEER-REVIEW REPORT

Name of journal: *World Journal of Gastroenterology*

Manuscript NO: 86628

Title: Location-based prediction model for Crohn’s disease regarding a novel serological marker, anti-chitinase 3-like 1 autoantibodies

Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer’s code: 03700188

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Adjunct Professor, Attending Doctor

Reviewer’s Country/Territory: Brazil

Author’s Country/Territory: Hungary

Manuscript submission date: 2023-06-28

Reviewer chosen by: Geng-Long Liu (Quit 2023)

Reviewer accepted review: 2023-08-27 23:31

Reviewer performed review: 2023-08-31 03:33

Review time: 3 Days and 4 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
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 checked="" type="checkbox"/> Grade A: Excellent <input 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 checked="" type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
Language quality	<input checked="" type="checkbox"/> Grade A: Priority publishing <input 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 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 title reflects the main subject of the manuscript The abstract summarizes and reflect the work The key words reflects well the focus of the manuscript The manuscript describes methods (e.g., experiments, data analysis, surveys, and clinical trials, etc.) in adequate detail. The research objectives were achieved and it brought some progress in this field. The figures, diagrams, and tables were sufficient, good quality and appropriately illustrative. The manuscript appropriately cited the latest, important and authoritative references in the Introduction and Discussion sections. The author self-cited once as first author and twice as second one. The manuscript is well, concisely, and coherently organized.



PEER-REVIEW REPORT

Name of journal: *World Journal of Gastroenterology*

Manuscript NO: 86628

Title: Location-based prediction model for Crohn’s disease regarding a novel serological marker, anti-chitinase 3-like 1 autoantibodies

Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer’s code: 02997260

Position: Peer Reviewer

Academic degree: PhD

Professional title: Senior Researcher

Reviewer’s Country/Territory: Lithuania

Author’s Country/Territory: Hungary

Manuscript submission date: 2023-06-28

Reviewer chosen by: Geng-Long Liu (Quit 2023)

Reviewer accepted review: 2023-08-31 09:03

Reviewer performed review: 2023-09-08 21:49

Review time: 8 Days and 12 Hours

Scientific quality	<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
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 checked="" 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

The manuscript presents the results of a robust and interesting study, it is written in good English, but needs some improvements. Some technical inaccuracies: The STROBE Statement checklist is missing, the cover letter was uploaded instead. In the Certificate of Statistical Analysis the signature of Elek Dinya was just copied from another document and pasted in this certificate. Comments on the manuscript text: How to understand the results of the univariate analysis presented in Table 1: in the part ‘Need for resective surgery’ where the number of subjects was given as a fractional number in the column ‘n of subjects’ ? To better support the findings of the study, it would be useful to provide estimates of the sensitivity and specificity of the anti-CHI3L1 test in predicting the course of IBD. In the Discussion section, the authors named numerous inflammatory conditions when CHI3L1 participates without clear indication of its role in these conditions. Please indicate the differences, if any. In connection with this, why did the authors conclude that CHI3L1 is a marker of IBD progression, as it has been found to overexpress in many inflammatory conditions in addition to CD and UC? It is more likely to be a marker of systemic inflammation, is it not? Since the authors found a higher concentration of anti-CHI3L1 in subjects having other antibodies, what about the possibility of overlapping? Had the authors checked the possibility of overlapping of different antibodies tests taking into account that YKL-CHI3L1 itself possesses domains for many mucosa (extracellular matrix) proteins? Did controls with positive anti-CHI3L1 develop UC or Cd during follow-up? What was the consequence of negative subjects at baseline becoming positive during follow-up?