

Format for ANSWERING REVIEWERS

April 10, 2015
Bucharest



Dear Editor,

Please find enclosed the edited manuscript in Word format (file name: 17470-reviewed.doc).

Title: The cardiovascular involvement in inflammatory bowel disease: dangerous liaisons

Author: Ana Maria Filimon, Lucian Negreanu, Michelle Doca Andreea Ciobanu, Carmen Monica Preda, Dragos Vinereanu

Name of Journal: *World Journal of Gastroenterology*

ESPS Manuscript NO: 17470

The manuscript has been improved according to the suggestions of reviewers:

1. Format has been updated

2. Revision has been made according to the suggestions of the reviewers:

(1) Reviewer no. **00227449**

Thank you for your comments. The text was corrected by a native speaker and modifications were made on the topic and lengths of the paragraphs.

We addressed the issue of the abbreviations and now they are defined when first used and constantly maintained throughout the text. We hope the modifications will make our article suitable for publication.

“This is an interesting review and the information provided has clinical significance as the title stated. However, it is poorly written as if the information was pooled from several sources. For example, some paragraphs have only one sentence; abbreviation usages are questionable and some were defined at the beginning and redefined later. It is probably better to limit the usage of abbreviations to those terms that are used more than 5 times throughout the manuscript. Until the writing problem has been taken care of, it is impossible to publish this”.

(2) Reviewer no 00227388

Thank you very much for your observation. We introduced a paragraph briefly explaining the hyper-coagulability mechanisms in IBD as recently presented by a WJG article by *Zezos et al.*

“Dear authors, congratulations for summarizing a number of studies from recent literature on this very important topic, which practising Gastroenterologists cannot any longer afford to ignore. It would have been more informative, even if in brief, you could describe the putative as well as well-known mechanisms leading to this increased both venous and arterial hyper-coagulability state. That would certainly increase the impact of this manuscript.”

(3) Reviewer no 00036328

We are indebted for your detailed and constructive observations and for the care and the help to improve our article. We modified all the abbreviations according to your suggestions. We introduced the remark about reaching mucosal healing only in some patients. In the comments section, we introduced a comment about the lack of statistical significance of some correlations in three of the studies. We modified the citations from ECCO 2015 according to your suggestions.

“The Editorial titled ‘The cardiovascular involvement in IBD: dangerous liaisons’ from Filimon AM and coworkers, summarizes the literature about cardiovascular risk and inflammatory bowel disease. The paper is well written and the references updated. There are no page numbers making the paper difficult to comment. My comments are listed below. 1. Replace in the title the abbreviation IBD with inflammatory bowel disease. 2. Abstract. - First sentence: add the abbreviation (IBD) after inflammatory bowel disease. - Replace MI with myocardial infarction. 3. VIII paragraph: - The criticism for reference 7 is that the need for steroids (OR: 2.97, 95%CI: 0.99-8.92) is not a true risk for VTE because 95%CI includes 1.0. If the confidence interval crosses 1 e.g. 95%CI 0.99-8.92 this implies there is no difference between arms of the study. - Last sentence, patient instead of patients. 4. IX paragraph: close the square bracket after 7. 5. X paragraph: delete cerebrovascular accidents and use only the abbreviation (CVA) (see III paragraph). The same for IHD. 6. XIV paragraph: - Delete myocardial infarction and use only the abbreviation (MI). - The criticism for reference 11 is that IBD is not a true risk (Hazard Ratios) for recurrent MI because 95%CI includes 1.0. 7. XVII paragraph: PVW in round brackets (PVW). 8. XVIII paragraph: - Replace ‘reaching mucosal healing’ with ‘reaching in some cases mucosal healing’. - Replace TNF with TNF-alpha. - Delete ischemic heart disease and cerebrovascular event and use only the abbreviations. - Reference 14 shows a lack of evidence that IHD and CVE may depend on the exposition or not to the anti-TNF-alpha (see point 3 and 6). 9. In the discussion section of the manuscript it should be mentioned the lack of statistical significance for some variables in the three studies. 10. The style for journal references should be revised.

11. The two references from ECCO Congress 2015 should be replaced with: Vegh Z, Golovics PA, Kurti Z, Lovasz B, Szita I, Balogh M, Pandur T, Gecse K, Lakatos L, Lakatos P. Incidence of and risk factors for thromboembolism in Inflammatory Bowel Disease: Results from a population-based inception cohort. *J Crohns Colitis* 2015; 9 Suppl 1: S31-32 Griffiths B, Curry N, Desborough M, Henton S, Bryant RV, Travis SP, Jairath V. Evaluation of global coagulation profiles in patients with acute severe colitis: Implications for thromboprophylaxis. *J Crohns Colitis* 2015; 9 Suppl 1: S32”

(4) Reviewer no **00503545**

Thank you for your valuable suggestions. We introduced two tables, one summarizing the results of the recent studies about cardiovascular involvement in IBD and the other the possible role of the therapeutic agents in IBD on CV risk. Now we feel that the liaisons between IBD and CV risk are more clearly presented by our article.

The first part of the article is conceived as an introduction to the subject; due to the constraints of the editorial format for WJG we did not create a separated Introduction section.

In this paper, the authors reviewed the cardiovascular involvement in IBD. This paper has been well written and the contents are interesting. I suggest that the authors should address the following points to improve the paper. 1. I suggest that the author should summarize the results of each study in Tables. 2. I suggest that the authors should prepare the section of Introduction in this paper.

3. References and typesetting were corrected

4. A core section was introduced

5. The manuscript was reviewed and edited in English by Ms Camille POLLAN, BA of Washington University

Thank you again for publishing our manuscript in the *World Journal of Gastroenterology*.

Sincerely yours,

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