

20th November 2015

Dear Editor,

Thank you for reviewing our manuscript titled 'Outcomes and patient perspectives' of transition care in Inflammatory Bowel Disease'.

We are pleased that the reviewers have found the manuscript interesting as we strongly feel that the data regarding current transition practices will greatly assist in the future design of improved transition programs with the aim of optimizing care for this cohort.

We acknowledge both of the reviewers comments and criticisms of the paper and we have addressed each point below.

Name of journal: World Journal of Gastroenterology

Manuscript NO.: 22854

Column: Retrospective Study

Title: Outcomes and patient perspectives' of transition care in Inflammatory Bowel Disease.

Authors: Alice L Bennett, David Moore, Peter A Bampton, Robert V Bryant and Jane M Andrews

Correspondence to: Alice L Bennett, Dr, Department of Gastroenterology, Q7, Royal Adelaide Hospital, North Terrace, ADELAIDE, SA 5000, Australia.
alicebennett14@hotmail.com Telephone: +61 8 8636 1180 Fax: +61 8 8636 2614

Reviewer code: 00035859 and 00049331

First decision: 2015-11-05 10:34

Scientific editor: Ya-Juan Ma

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

Reviewer: 00049331

In this cross-sectional study, the authors provide well documented outcomes of transition from paediatric to adult care in a large group of patients with inflammatory bowel disease.

Limited data exist regarding disease outcomes for Inflammatory Bowel Disease subsequent to transition from paediatric to adult care and the patients' perspectives on the process. The Authors found that transition programs did not appear to adversely affect disease or psychosocial outcomes; however, patients had poor knowledge of their transition plan and many were not strongly prepared. This study will give us beneficial information about outcomes of transition from paediatric to adult care in patients with inflammatory bowel disease.

- We thank the reviewer for their comments and agree that this article provides important data which will benefit all those involved in the care of this cohort of Inflammatory Bowel Disease (IBD) patients including healthcare policy makers. Currently, very little data exists in this area of care and consequently the information obtained from this study is relevant and valuable.

However, the title could be made more informative as "Outcomes and patients' perspectives of transition from paediatric to adult care in Inflammatory Bowel Disease". This study is acceptable for publication.

- We acknowledge that the title could be more informative and following the reviewer's suggestion we have changed the title.

Reviewer: 00035859

This is a retrospective study, a survey, on important aspects in IBD, transition care. The article describes the disease and some other aspects, but misses on the details the important aspects, financial aspects, reproductive health, substance use and abuse and effect of disease and development.

- We acknowledge the reviewers comments regarding the absence of details regarding other lifestyle factors that may have been affected by the transition process. However, we would like to point out that many other key social outcomes of the cohort including education, employment, relationship status, location of residence and socio-economic status based up location of residence are described. We feel that these aspects provide an important representative of social wellbeing for the cohort. Ideally many other aspects could have been included; however, this would have resulted in a larger questionnaire and risked deterring the cohort from participating.

Other than the mood aspects, were there any aspects related sexual health, including pregnancy?

- Participant pregnancy data was not collected from the questionnaire; however, sexual health discussions were reviewed from paediatric case notes. This is very important as many young people are sexually active before age 18 and the lack of early discussion misses an opportunity to inform them accurately about how their IBD may or may not affect sexual function, sexually transmitted infections, fertility and pregnancy. This is an area where there is known to be poor knowledge amongst patients and primary

care doctors. This topic was discussed in the manuscript in the *Discussion, paragraph 7*.

The authors should also add what new aspect does this article add?

- This article adds many new and informative aspects to the current body of literature regarding transition practices in IBD.

Firstly, practical recommendations for transitioning IBD patients have been suggested; however, these proposals lack actual outcome data and have omitted patient perspectives. Thus it is not yet clear whether these recommendations would improve health outcomes. This study is the first to our knowledge that simultaneously describes outcome and patient perspective data, which are needed to critically appraise current practices and inform the development of interventions intended to improve transition outcomes.

Secondly, it highlights specific areas of transition care that could be optimized. These include psychological care, disease education for patients and sexual health discussions.

Finally, it provides patient perspectives regarding preferred transition practices, which to our knowledge has not been surveyed previously.

These new aspects in IBD transition care serve as an important missing piece that contributes to a foundation on which future transition practices can be designed to optimise the process and improve outcomes.

Editor's suggestions and requests

- Supportive foundations: Paragraph included.
- Files related to academic rules and norms: The files related to academic rules and norms including the Institutional Review Board statement, informed consent statement, conflict-of-interest statement, and data sharing statement are attached. Given that the study presents descriptive biostatistics, with respect, we do not feel that the study requires a statistical review performed by a biomedical statistician.
- CrossCheck analysis and Google Scholar search: A screen shot of the results of the Google Scholar search is attached. Given that we do not have a subscription to CrossCheck we used a plagiarism program provided by the University of Adelaide called 'Turnitin'. This revealed a 9% similarity with other references however if the report is reviewed, the areas of text highlighted as 'similar' are not plagiarizing the 'source' found. Please read the instructions for the program which explains how to interpret the results. We ensure the WJG that the manuscript does not contain plagiarism.

- Copyright Assignment form: The copyright assignment form is attached.
- Language certificate: With respect, given that all authors are native speakers of English, we do not feel that the manuscript requires a language certificate. We disagree with the language grading for the manuscript and cannot determine the reason for not being graded an A.
- Comments: I am unsure if the editor requires the authors complete this section or if this is completed by the editors themselves.
- Reference 3: Checked and correct.
- Figure 1: Created in power point and replaced previous figure.
- Tables: Checked. All data is correct.

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

Yours sincerely,



Dr Alice Bennett
 Department of Gastroenterology, Q7,
 Royal Adelaide Hospital
 North Terrace, ADELAIDE, SA 500, Australia
 Alicebennett14@hotmail.com