

Scientific research process

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Manuscript Type: **Observational Study**

1 What did this study explore?

This study aimed at assessing the quality of life (QoL) in children with inflammatory bowel diseases (IBD) and whether it is influenced by disease- and non-disease related parameters such as activity, medications, disease duration, age of onset, and other.

2 How did the authors perform all experiments?

This was a cross-sectional, clinical, observational study. No experimental procedures or interventions were undertaken. Patients filled the IMPACT-III questionnaire, a validated, structured scale that offers a quantitative measure of QoL, either as outpatients, or during a hospitalization. All additional data were extracted from hospital records. All patients participated after informed consent was obtained by their legal representatives

3 How did the authors process all experimental data?

Data were recorded in a database and analysed by parametric and non-parametric procedures using appropriate statistical software (Stata 11.0)

4 How did the authors deal with the pre-study hypothesis?

The pre-study hypothesis was that QoL is optimum in patients in clinical remission with minimum disruption of their everyday activities who have adapted to the requirements and restrictions imposed by a chronic disease. This, ideal, status might be altered by disease-related factors such as exacerbations, medications, hospitalizations and extra-intestinal manifestations, but also by parameters related to a child's evolving response to a different life-style as dictated by a chronic condition. Such parameters, that were assessed, were age, disease duration and age of disease onset.

5 What are the novel findings of this study?

The results confirmed the inverse relationship between QoL and disease activity. In addition, the analysis identified the importance of a physician's assessment rather than the numerical activity indices, as a tool in detecting children at risk for poor QoL. The study also showed that a specific window of increased vulnerability, during the early years after the diagnosis particularly in children of younger age, exists.



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