

## PEER-REVIEW REPORT

**Reviewer's code:** 00227403

### COMMENTS TO AUTHORS

Minor comments In the section Introduction (text), Inflammatory Bowel Diseases should be shortened as IBDs In the section Introduction, the first time that the authors reported TNF should explain "Tumor Necrosis Factor". The same for NSAIDs, DMARD.....and all acronyms in the text. To better explain the reason of a common treatment in rheumatology and in gastroenterology, for ES, the authors should highlight the existence of commons pathways linking conditions as spondyloarthritis with IBDs. An updated review with prevalent hypothesis has been recently published by Actis et al. *Minerva Med* 2016;107:401-12. This concept should be reported in a sentence in the section Introduction. Main comment Among patients with ES in treatment with anti-TNF-alfa there were those with IBD in remission. In the figure 1 the authors report "used as recommended for IBD treatment". Please, could the authors specify better this issue in the section materials and methods?

### REPLY OF THE AUTHORS

Dear reviewer,

Thanks for the interest demonstrated in our work and for your useful interesting comments.

Following, there are reported our replies.

1. We have corrected all the abbreviations/acronyms that were reported in the text.
2. We have highlighted and reported in a sentence in the section Introduction the presence of the common pathway linking spondyloarthritis with IBDs and we have inserted in the references the suggested paper.
3. In the Materials and Methods section we have specified what we mean for "used as



## BAISHIDENG PUBLISHING GROUP INC

7901 Stoneridge Drive, Suite 501, Pleasanton, CA 94588, USA

Telephone: +1-925-223-8242

Fax: +1-925-223-8243

E-mail: [bpgoffice@wjgnet.com](mailto:bpgoffice@wjgnet.com)

<http://www.wjgnet.com>

---

recommended for IBD treatment”, that is the dose regimen of adalimumab in case of inflammatory bowel disease.

Thank again for your interesting comments, best regards,

Michele M. Luchetti