

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Meta-Analysis

**Manuscript NO:** 48415

**Title:** Pediatric recurrent Clostridium difficile infections in immunocompetent children:  
Lessons learned from case reports of the first twelve consecutive patients

**Reviewer's code:** 00159305

**Reviewer's country:** Romania

**Science editor:** Ying Dou

**Reviewer accepted review:** 2019-04-29 16:22

**Reviewer performed review:** 2019-04-30 18:15

**Review time:** 1 Day and 1 Hour

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input checked="" type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input checked="" type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input checked="" type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

### SPECIFIC COMMENTS TO AUTHORS

I read with interest your manuscript and I have following comments: 1. I am afraid you have not followed the instruction for authors when submitting a manuscript to WJG: -core-tip is lacking -References: please, take care at style for journal references. 2.

Abstract. You mentioned that 4 patients had new pathology identified, including IBD (1), eosinophilic colitis (1) and CDI symptoms resolved after treatment of colitis without target therapy for CDI. However, in Table 1 there are more children with other pathology such as eosinophilic esophagitis and lactase deficiency (3). You mentioned that all patients were treated with antibiotic courses for CDI? How did you differentiate the response? 3. Methods: it is hard to understand that all children were evaluated at a pediatric gastroenterology service for several episodes of CDI associated with bloody diarrhea without being investigated for differential diagnosis with IBD proctitis! Stool microbiome methods-too detailed, difficult to be followed by readers. 4. It is not clear if the study was prospective or retrospective (confusing results-"12 children seen consecutively."and the "charts were reviewed"). The number of children included is very small. Conclusion is confusing and should be rewritten in a more clear way.

#### **INITIAL REVIEW OF THE MANUSCRIPT**

##### ***Google Search:***

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

##### ***BPG Search:***

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

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**Manuscript NO:** 48415

**Title:** Pediatric recurrent Clostridium difficile infections in immunocompetent children:  
Lessons learned from case reports of the first twelve consecutive patients

**Reviewer's code:** 03017551

**Reviewer's country:** Poland

**Science editor:** Ying Dou

**Reviewer accepted review:** 2019-05-23 08:46

**Reviewer performed review:** 2019-05-28 09:08

**Review time:** 5 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
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			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

### SPECIFIC COMMENTS TO AUTHORS

This study contains very interesting reports on recurrent Clostridium difficile infections. Very important report - Fecal transplant in this pediatric patients is highly effective and result in durable gut microbial changes. My attention - only twelve children with CDI.



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