



**PEER-REVIEW REPORT**

**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 49615

**Title:** Nonalcoholic fatty liver disease in patients with inflammatory bowel disease:  
Beyond the natural history

**Reviewer’s code:** 02539941

**Reviewer’s country:** China

**Science editor:** Jia-Ping Yan

**Reviewer accepted review:** 2019-06-13 11:29

**Reviewer performed review:** 2019-06-19 11:31

**Review time:** 6 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:
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input 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 checked="" type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input 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**

Nonalcoholic fatty liver disease (NAFLD) is common in patients with Inflammatory Bowel Disease (IBD). This study evaluated the prevalence of steatosis and liver fibrosis in a cohort of IBD patients and identified the metabolic- and IBD-related risk factors for



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NAFLD. The high prevalence (46.6%) of NAFLD was found in their IBD cohort. There was no association between natural history of IBD and the presence and grade of steatosis, but the dietary habits and the metabolic profile were the risk factors for NAFLD. These results provided some reference in clinical practice for monitoring and follow-up the IBD patients. There were two questions in the study. 1. In the current study, hepatic steatosis was detected and graded by abdominal ultrasound. Have you measured the CAP (controlled attenuation parameter) values by Transient Elastography at the same time? It may be much more accurate in grading of hepatic steatosis. 2. What's the meaning of visceral fat (>8) in Table 3, and how to detect?

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

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

- The same title
- Duplicate publication
- Plagiarism
- No

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

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- No



**PEER-REVIEW REPORT**

**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 49615

**Title:** Nonalcoholic fatty liver disease in patients with inflammatory bowel disease:  
Beyond the natural history

**Reviewer’s code:** 03388095

**Reviewer’s country:** United States

**Science editor:** Jia-Ping Yan

**Reviewer accepted review:** 2019-06-13 12:26

**Reviewer performed review:** 2019-06-28 17:32

**Review time:** 15 Days and 5 Hours

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:
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input checked="" type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input 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 type="checkbox"/> Major revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

**SPECIFIC COMMENTS TO AUTHORS**

- This is a well-designed study on the prevalence and risk factors of hepatic steatosis (NAFLD) and fibrosis (LF) in patients with inflammatory bowel disease (IBD) using non-invasive techniques.
- The study comprised of relative large number of cases (178)



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and strict inclusion and exclusion criteria, assessment of disease activity, expert GI radiologist evaluation of hepatic steatosis and fibrosis, and assessment of dietary intake and anthropometric measurements. • Although the study comes to a negative conclusion on the finding of NFALD and LF in IBD population, the study still holds some value to be published.

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**PEER-REVIEW REPORT**

**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 49615

**Title:** Nonalcoholic fatty liver disease in patients with inflammatory bowel disease:  
Beyond the natural history

**Reviewer's code:** 03009698

**Reviewer's country:** China

**Science editor:** Jia-Ping Yan

**Reviewer accepted review:** 2019-06-13 07:47

**Reviewer performed review:** 2019-07-02 07:16

**Review time:** 18 Days and 23 Hours

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 checked="" 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 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 checked="" type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

**SPECIFIC COMMENTS TO AUTHORS**

1. author found "No differences between IBD diagnosis (CD or UC) and disease duration were found but the duration of disease remission was significantly longer in NAFLD patients as compared to IBD patients without NAFLD (33.9 months vs 21.14; p<0.05,



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Figure 2)." I want know whether this two had IBD medication difference which affected the results. 2. "IBD patients with NAFLD had higher mean BMI than the those without NAFLD". Whether different classification of IBD had the same results.

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