



## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Clinical Cases*

**Manuscript NO:** 78867

**Title:** Quality of care in patients with inflammatory bowel disease from a public health center in Brazil.

**Provenance and peer review:** Invited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 00503545

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Director, Doctor

**Reviewer's Country/Territory:** Japan

**Author's Country/Territory:** Brazil

**Manuscript submission date:** 2022-07-20

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-07-26 02:42

**Reviewer performed review:** 2022-07-31 12:14

**Review time:** 5 Days and 9 Hours

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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<b>Peer-reviewer statements</b>	Peer-Review: [ <input checked="" type="checkbox"/> ] Anonymous [ <input type="checkbox"/> ] Onymous Conflicts-of-Interest: [ <input type="checkbox"/> ] Yes [ <input checked="" type="checkbox"/> ] No
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### **SPECIFIC COMMENTS TO AUTHORS**

In this paper, the authors evaluate QoC in patients from a single IBD reference center in detail through the QUOTE-IBD questionnaire. They concluded that patients from the IBD public center reported good doctor-patient relationships, but had problems related to the healthcare structure. The theme of the study is interesting and the paper is well written. However, I suggest that the authors address the following points. The results of the study showed that disease activity was not associated with satisfaction with the care received at the IBD healthcare center and that the use of mesalazine was associated with lower satisfaction with the service received. However, these findings seem to be a little strange. Therefore, I suggest that the authors discuss these results in the section of the Discussion.



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**Reviewer's code:** 04163041

**Position:** Editorial Board

**Academic degree:** FACS, MBBS, MNAMS

**Professional title:** Professor

**Reviewer's Country/Territory:** India

**Author's Country/Territory:** Brazil

**Manuscript submission date:** 2022-07-20

**Reviewer chosen by:** Dong-Mei Wang

**Reviewer accepted review:** 2022-09-01 16:19

**Reviewer performed review:** 2022-09-13 18:12

**Review time:** 12 Days and 1 Hour

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
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The study indicates the areas for improvement in patient care in IBD management but may not reflect the quality of care provided by the center. To assess the quality of care provided one should assess the effectiveness, safety and people centered service in addition to timely and equitable service offered, as per the WHO directive. In this study, the authors analyze the quality of care provided based on patient reported answers, which may not assess these parameters. Whether the effectiveness of care provided for IBD patients, match the one provided based on current evidence based professional knowledge, may not be assessed by this patient's reported answers and it may be biased based on his clinical outcome. So also, the overall safety of the health care provided may be beyond the patient's assessment capability. The health care provided by the service is funded by the govt and to include the cost factor may mislead the assessment. Moreover, the "quality of life" of the IBD patients, though mainly depended on the quality of care provided, is also influenced by several other factors which are beyond the realm of the questionnaire.