

## PEER-REVIEW REPORT

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

**Manuscript NO:** 86823

**Title:** Colorectal motility patterns and psychiatric traits in functional constipation and constipation-predominant irritable bowel syndrome: A study from China

**Provenance and peer review:** Unsolicited manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 05824731

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

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

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

**Manuscript submission date:** 2023-07-10

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2023-07-10 10:10

**Reviewer performed review:** 2023-07-10 10:12

**Review time:** 1 Hour

Scientific quality	<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 Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation



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Publishing  
Group**

7041 Koll Center Parkway, Suite  
160, Pleasanton, CA 94566, USA  
**Telephone:** +1-925-399-1568  
**E-mail:** bpgoffice@wjgnet.com  
**https://**www.wjgnet.com

<b>Scientific significance of the conclusion in this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input checked="" 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<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

#### SPECIFIC COMMENTS TO AUTHORS

Good but need some revision

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**Reviewer's code:** 03476120

**Position:** Editorial Board

**Academic degree:** BSc, FACS, FASCRS, FICS, FRCS, FRCS (Ed), MBBS, MCh

**Professional title:** Professor

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

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

**Manuscript submission date:** 2023-07-10

**Reviewer chosen by:** Geng-Long Liu

**Reviewer accepted review:** 2023-07-31 07:54

**Reviewer performed review:** 2023-08-08 08:12

**Review time:** 8 Days

Scientific quality	<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
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<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<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

## SPECIFIC COMMENTS TO AUTHORS

Nice study about the Psychiatric and colonic motility in IBS-C and FC patients. The comments are as follows: 1. There are already studies and known facts about the patients of Chronic constipation and its association with Psychiatric symptoms in many and also impairment of colonic motility . This study is not new . 2. There is significant mismatch in the number of patients in IBS-C Vs FC . Conclusions drawn are not without errors 3. The exact clinical usefulness of the study is not new .

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**Peer-review model:** Single blind

**Reviewer's code:** 02445242

**Position:** Editorial Board

**Academic degree:** MAMS, MBBS, MD

**Professional title:** Professor

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

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

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**Reviewer chosen by:** Geng-Long Liu

**Reviewer accepted review:** 2023-08-28 14:23

**Reviewer performed review:** 2023-08-31 16:53

**Review time:** 3 Days and 2 Hours

Scientific quality	<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
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	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

## SPECIFIC COMMENTS TO AUTHORS

I am not qualified to comment on the gastrointestinal aspects of the differences between functional constipation (FC) and irritable bowel syndrome with constipation (IBS-C). However, it is somewhat surprising that the authors claim that there is limited data on these disorders from China. A recent systematic review and meta-analysis on prevalence and risk factors for functional constipation from China identified 39 population-based cross-sectional studies on the subject (Chen et al. Front Med (Lausanne). 2022 Feb 16; 9:815156. doi: 10.3389/fmed.2022.815156). Significantly enough, this meta-analysis found a higher prevalence of anxiety, depression, and poor sleep quality among persons with FC compared with those without FC. Similarly, a recent bibliometric analysis of studies of depression and anxiety in IBS showed that the largest number of publications were from the USA (833, 32.51%), followed by China (316, 12.33%), UK (302, 11.79%), Sweden (172, 6.71%), and Australia (162, 6.32%) [Chen et al. 2022 Front. Public Health 10:947097. doi: 10.3389/fpubh.2022.947097] The second limitation of such hospital-based studies, particularly from specialty clinics is that there is a significant referral bias affecting hospital attendees. For a very long time it has been



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7041 Koll Center Parkway, Suite  
160, Pleasanton, CA 94566, USA  
**Telephone:** +1-925-399-1568  
**E-mail:** [bpgoffice@wjgnet.com](mailto:bpgoffice@wjgnet.com)  
<https://www.wjgnet.com>

known that people who attend hospitals with functional bowel complaints differ from those in the community not in the nature of bowel symptoms, but in their psychosocial profile. Hospital attendees have a very high rates of depressive, anxiety, or somatoform disorders. Symptoms of depression and anxiety are also far more common in them as are maladaptive personality traits. Consultations are often triggered by stressful life events and studies have also shown an association with childhood abuse (Farthing 1995, BMJ; Zamani et al. Aliment Pharmacol Ther. 2019 Jul;50(2):132-143; Staudacher et al. Lancet Gastroenterol Hepatol. 2021 May;6(5):401-410; Hu et al. BMC Gastroenterol. 2021 Jan 7;21(1):23). Therefore hospital-based studies may not be representative of the actual psychosocial profile of functional bowel disorders. There are two implications of these facts for the present study. Firstly, hospital-based studies have to be supplemented by community-based studies to reveal the true profiles of different functional bowel disorders. The authors should comment on this significant limitation of their study. Secondly, the range of psychological and psychological problems associated with these disorders is much wider than investigated in this study. This is another limitation that deserves an explanation.