

## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 27560

**Title:** A potential model for differential diagnosis between Crohn's disease and primary intestinal lymphoma

**Reviewer's code:** 00061704

**Reviewer's country:** Germany

**Science editor:** Ya-Juan Ma

**Date sent for review:** 2016-06-16 10:47

**Date reviewed:** 2016-06-30 19:55

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

## COMMENTS TO AUTHORS

It is important and well done prospective study on the difference between Crohn's disease and primary intestinal lymphoma (PIL). The authors should add to their differential analysis the role of fecal calprotectin used in the differentiation between irritable bowel Syndrome and Crohn's disease.

## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 27560

**Title:** A potential model for differential diagnosis between Crohn's disease and primary intestinal lymphoma

**Reviewer's code:** 00057695

**Reviewer's country:** Saudi Arabia

**Science editor:** Ya-Juan Ma

**Date sent for review:** 2016-06-16 10:47

**Date reviewed:** 2016-07-01 15:45

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
	<input type="checkbox"/> Grade D: Rejected	BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

## COMMENTS TO AUTHORS

This is an interesting retrospective review of demographic, clinical, laboratorial, endoscopic and CT enterography parameters of 85 patients with Crohn's disease (CD) and 56 patients with primary intestinal lymphoma (PIL). The differentiation between these two entities could be elusive which may delay diagnosis and treatment with subsequent negative impact on the prognosis. Based on the reviewed parameters, the authors try to derive a scoring system that helps to differentiate between CD and PIL. However, I have the following major comments: It is unclear to me how the score can be calculated and hence, the scoring system needs to be elaborated upon further with special explanation regarding +1 and -1 scores and how is it always the resultant score will be either 1 (positive) or 0 (negative)? It is also worth providing an example of its application. Moreover, another condition that overlaps in symptoms and signs with CD and PIL is intestinal tuberculosis; this needs to be alluded to in the discussion although, it is not within the study subject. Also, the association of intestinal lymphoma in pre-existing Crohn's disease needs to be addressed. Finally, the FDG-PET/CT technique is an excellent noninvasive method in evaluating the activity of bowel inflammation in



## BAISHIDENG PUBLISHING GROUP INC

8226 Regency Drive, 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>

---

patients with CD especially in parts of the small bowel that are not accessible to endoscopy. It would have been interesting to compare this modality in both conditions (CD vs. PIL) to see if there is any significant difference. Of course, this has to be weighed against the additional risk of radiation exposure. Minor comments: there are many typographical and grammar errors throughout the text that need to be corrected in the revised version. Examples: in China recent years, on histologically confirmation, ascite, CD patients was, had not no significance, ulcers were, would result to fibrosis, acquire a even. Also, one or two sentences need to be rephrased for clarity e.g. "LDH was found to be elevated in 14.3%(8/56) of PIL patients, much higher than 2.4%(2/85) of CD patients ( $P<0.05$ )". Change (involvement segments  $\leq 3$ ) to (involvement of  $\leq 3$  segments).