



PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 46134

Title: Increased risk of atrial fibrillation in patients with inflammatory bowel disease: A nationwide population-based study

Reviewer’s code: 00053423

Reviewer’s country: Brazil

Science editor: Jia-Ping Yan

Reviewer accepted review: 2019-02-07 16:33

Reviewer performed review: 2019-02-10 11:40

Review time: 2 Days and 19 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 type="checkbox"/> Grade B: Very good	<input checked="" 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

The study of Choi et al is an interesting study that reports association between AF occurrence and IBD in a case-control study. They surprisingly showed no increased association with age and classical cardiovascular risk factors in these patients. The



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association was stronger with CD, and in individuals with more severe forms of disease , although they did not have specific information to determine the severity of the disease. **Methods:** Page 7: Rewrite in methods what was considered mild-moderate IBD, and moderate severe disease. -Did the authors have the information of which patients performed major surgery? And if AF occurred in perioperative period this variable should be adjusted in the multivariate analysis. **Discussion** -The authors need to address an interesting aspect of their findings why older individuals and those with classical risk factors and IBD did not have and greater risk in relation to those with IBD and without cardiovascular risk factors . -What was the loss of information of participants in the study?

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

- The same title
- Duplicate publication
- Plagiarism
- No

BPG Search:

- The same title
- Duplicate publication
- Plagiarism
- No



PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 46134

Title: Increased risk of atrial fibrillation in patients with inflammatory bowel disease: A nationwide population-based study

Reviewer’s code: 00049331

Reviewer’s country: Turkey

Science editor: Jia-Ping Yan

Reviewer accepted review: 2019-02-06 12:25

Reviewer performed review: 2019-02-11 20:34

Review time: 5 Days and 8 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 polishing	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	(General priority)	Peer-reviewer’s expertise on the topic of the manuscript:
<input type="checkbox"/> Grade E: Do not publish	<input type="checkbox"/> Grade D: Rejection	<input checked="" type="checkbox"/> Minor revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Major revision	<input type="checkbox"/> General
		<input type="checkbox"/> Rejection	<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

This retrospective study is the large population-based study investigating the association between IBD and the incidence of AF in Asian cohort. The Authors reported that IBD was associated with an increased risk of AF, both CD and UC increase the risk of AF,



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with a higher risk in patients with CD than UC. And also patients receiving immune-modulators, systemic corticosteroids, and/or biological agents showed a higher risk of AF, and the relative risk of IBD for the development of AF was particularly high in younger patients and in those without cardiovascular risk factors. In this study, results are important and give us valuable information. However, I have some comments. In the discussion section, subtitles like “Major findings, Inflammatory bowel disease serves as an independent risk factor for the development of atrial fibrillation, ..., Risk of incident atrial fibrillation in patients with inflammatory bowel disease based on ethnicity” should be omitted. Discussion section should be changed to formal structure as accordance with common literatures. This study is acceptable for publication after arrangements according to recommendations.

INITIAL REVIEW OF THE MANUSCRIPT

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PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 46134

Title: Increased risk of atrial fibrillation in patients with inflammatory bowel disease: A nationwide population-based study

Reviewer’s code: 00036825

Reviewer’s country: Hungary

Science editor: Jia-Ping Yan

Reviewer accepted review: 2019-02-06 18:49

Reviewer performed review: 2019-02-19 21:29

Review time: 13 Days and 2 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 type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
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<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer’s expertise on the
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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

Unfortunately the manuscript can not provide informations about clinical data(e.g. time-course and activity of the diseases,laboratory data, time duration of treatment modalities) and their relationship with IBD.



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