

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 8736

Title: Identification of Pathologic Features Associated with “Ulcerative Colitis-Like” Crohn’s Disease

Reviewer code: 02548901

Science editor: Qi, Yuan

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CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

This is a single centre, retrospective case control study with patients who had undergone RPC for ‘true UC’ compared with patients who were subsequently diagnosed with CD after surgery. Histopathological features were compared between 17 ‘UC-like’ CD patients and 18 ‘true UC’ patients to identify factors predictive of CD. Overall, the paper is well written. However, I have some queries as follows:- 1. There were approximately 200 patients who underwent RPC during the study period, with 17 ‘UC-like’ CD patients, and 183 ‘true UC’ patients. Why do the authors not incorporate larger number of ‘true UC’ controls to improve statistical significance and to strengthen validity? The study : control ratio should be 1 : 3 or 1 : 4. 2. What is the median follow up for both cohorts? If the ‘true UC’ cohort has a relatively short follow up, how can the authors be sure that these patients will remain ‘true UC’ in the future? 3. A large study involving 2814 patients evaluating factors predictive of subsequent diagnosis of CD after IPAA have been previously reported (Melton GB et al, Colorectal Dis. 2010 Oct;12(10):1026-32). This study reported younger age in the ‘UC-like’ CD patients too, amongst other factors not found to be significant by the authors of the current study. Please quote and discuss. 4. In the Results, Microscopic Findings section, 4th paragraph, aphthous ulcer and granuloma was identified in a ‘UC-like’ CD patient each. Is RPC routinely offered to patients with such microscopic findings? How about patients with indeterminate colitis, as such an entity was not discussed in the current study. 5. Backwash ileitis is a well-recognised feature of UC. Is the lack of ileitis in the ‘true UC’ cohort in the current study a reflection of the relatively small cohort? Minor Changes:- 1. Results, Microscopic Findings, 2nd sentence, 4 and 7 should be four and seven.