

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 18352

Title: How to predict clinical relapse in inflammatory bowel disease patients

Reviewer's code: 02529590

Reviewer's country: Czech Republic

Science editor: Jing Yu

Date sent for review: 2015-04-19 15:11

Date reviewed: 2015-06-14 18:04

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input checked="" type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input 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"/> 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

Prediction of IBD relapse with its complex nature and diagnosing latency is very important for providing appropriate interventions. In this regard, identification of most of contemplated factors is very important and authors are congratulated for this attempt. They choose a common, important topic in IBD practice, use several sources of evidence-based reviews on the topic, rate the level of evidence for key recommendations and provide a table of key summary points. The teaching value of the article must be appreciated.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 18352

Title: How to predict clinical relapse in inflammatory bowel disease patients

Reviewer's code: 02441104

Reviewer's country: Bulgaria

Science editor: Jing Yu

Date sent for review: 2015-04-19 15:11

Date reviewed: 2015-06-14 20:59

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input checked="" 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"/> 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

The biomarkers of IBD, including serological tests, fecal markers and genetically predisposed gene polymorphisms, are tools for disease diagnosis, estimation of activity, follow-up and disease prognosis. Therefore, the issue of identifying predictors of relapse and severe clinical course is essential. This review summarizes the current data on the most studied predictors of aggressive disease for both CD and UC. The review is very well written, clear, in very good English and easy to read. In my opinion, it would be better other biomarkers of IBD, including genetic (ATG16L1 and MDR1 gene polymorphisms etc), serologic (anti-OmpC, anti-CBir1, anti-chitobioside carbohydrate antibody and new anti-glycan antibodies etc), as well as fecal (indium 111-labeled leukocytes, alpha1-antitrypsin levels, alpha2-macroglobulin, myeloperoxidase, PMN-elastase, M2-pyruvate kinase) markers to be discussed in the review, although they are not suitable for monitoring disease activity in the routine clinical practice.