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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Radiology

ESPS manuscript NO: 16759

Title: Small bowel imaging of inflammatory bowel disease

Reviewer's code: 02941672

Reviewer's country: Japan

Science editor: Xue-Mei Gong

Date sent for review: 2015-02-01 18:26

Date reviewed: 2015-02-09 14:50

| 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 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 checked="" 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 type="checkbox"/> Grade D: Rejected | <input checked="" type="checkbox"/> No | <input checked="" type="checkbox"/> Minor revision |
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| | | <input type="checkbox"/> Duplicate publication | |
| | | <input type="checkbox"/> Plagiarism | |
| | | <input checked="" type="checkbox"/> No | |

COMMENTS TO AUTHORS

These are the comments for the editorial of "Small Bowel Imaging". The paper is well written, but some modifications are recommended as follows. 1. The title is too vague to understand. That should be changed like "Small Bowel Imaging of IBD". 2. The descriptions about double-balloon or single balloon endoscopy are required as mentioned like capsule endoscopy. 3. Period (.) is lacking at the last sentence of page 3. 4. References No.7 and 8 are not found in the manuscript.



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| | | <input checked="" type="checkbox"/> No | |

COMMENTS TO AUTHORS

There is no doubt that the author did a great effort for comprehensive presentation of the problems in the diagnosis of small bowel pathology. However, for many years, techniques using barium for small bowel examination were slowly abandoned, partly because of high radiation doses, partly due to the complicated and long process of performing this procedure. Also, the statistics recorded a relatively high percentage of false negative results. In this sense, the author did not present revolutionary new facts. Definitely, MRI diagnosis is more accurate and provides more comfort to both patient and doctor, especially if the diagnosis is completed with double contrast (oral and luminal). Yet, barium contrast examination or MRI does not provide insight into the intestinal motility, as in the case of IBD, which is a crucial point. I think that the author has to be more focused on the examination intestinal motility that accompanies IBD. This disorder is always an indication and the serious signal to turn surgeons in the treatment. Intestinal transit scintigraphy can significantly contribute to the examination of the motility of the gastrointestinal tract, especially the colon and the distal portion of the ileum, as a predominant site of pathological changes in IBD. Few quality images would significantly raise the quality of work