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## ESPS Peer-review Report

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

**ESPS Manuscript NO:** 4726

**Title:** Functional/ motility disorders in inflammatory bowel diseases (author ID: 00008517)

**Reviewer code:** 01115220

**Science editor:** Wen, Ling-Ling

**Date sent for review:** 2013-07-19 22:51

**Date reviewed:** 2013-07-31 17:26

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	BPG Search:	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

## COMMENTS TO AUTHORS

It was interesting to read this paper which covers the perhaps overlooked area of functional bowel disturbances in IBD. This is certainly an important areas and compregensive review papers are helpful to raise the profile of this rather neglected area. The authors have covered a lot of content concisely and the overall context of the manuscript is generally appropriate. Several areas would benefit from some attention. 1. Consideration should be given to changing the title: this paper clearly considers motility problems in relation to IBD and it would clarify the issues if this were much more highlighted in the title and abstract. The nomeclature of "functional" diseases is confusing even for a specialist but the positioning on fucntional in the title does rather suggest that there will be an in-depth consideration of functional symptoms and problems, such as IBS, but this is very much not the thrust of the paper. Equally whilst achalasia is indeed a disorder of function, as there is clearly defined pathology this is probably best not discussed in this context. 2. Both in the abstract and the text, it would help if some data for the prevalence of the various abnormalities were provided to give some context as to the importance. For example how prevalent is esophagela involvement in Crohn's? 3. Although some motor abnormaities are described, there is very little in the paper that actually correlates this with any symmptoms. For instance it is well known that IBS symptoms can significantly increase the CDAI but can the authors relate these motility changes to symptoms? 4. Some further explanation of the inflammtion-functional disturbances paradigm for IBS or functional dyspepsia and references would help to place these discussion in context. Perhaps to much current understanding is assumed in the early parts of the paper. 5. As above, functionl bowel disturbances means different things to different readers and it would help to clearly define what the authors mean. Do there mean a disorder of function as seen with phsyiological testing or functional symptoms? 6.



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Some more specificity on the testing modalities used would place the discussion in context: eg which radiological modality was used for the assessment of gastric motility? 7. The manuscript is all text and perhaps 1 or 2 figures or tables will break up the manuscript and improve the presentation. Perhaps will some emphasis on the mechanisms? Which cells and mediators could be important? 8. The authors have not mentioned the response to treatments, I do not specifically know if there are data, but do the motility changes in IBD respond as do the non-IBD changes? 9. The major question remains, are these motor abnormalities symptomatically significant? Could the authors review this in more detail? For instance do the various motor abnormalities alter the delivery of mesalazine preparations throughout the colon or small bowel?