

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 3087

Title: Connective Tissue Diseases Associated with Primary Biliary Cirrhosis : A Large Population-based Cohort Study

Reviewer code: 02462197

Science editor: Song, Xiu-Xia

Date sent for review: 2013-04-07 14:00

Date reviewed: 2013-04-07 16:48

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> [Y] Accept
<input type="checkbox"/> [Y] Grade B (Very good)	<input type="checkbox"/> [Y] Grade B: minor language polishing	<input type="checkbox"/> [] Existed	<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"/> [] No records	<input type="checkbox"/> [] Rejection
<input type="checkbox"/> [] Grade D (Fair)		BPG Search:	<input type="checkbox"/> [] Minor revision
<input type="checkbox"/> [] Grade E (Poor)	<input type="checkbox"/> [] Grade D: rejected	<input type="checkbox"/> [] Existed	<input type="checkbox"/> [] Major revision
		<input type="checkbox"/> [] No records	

COMMENTS TO AUTHORS

April 07, 2013 World Journal of Gastroenterology ESPS Manuscript NO: 3087 Title: Connective Tissue Diseases Associated with Primary Biliary Cirrhosis: A Large Population-based Cohort Study This is a retrospective monocentre study aimed to establish the frequency and clinical features of connective tissue diseases (CTDs) in a large cohort (n= 322) of patients with primary biliary cirrhosis (PBC). GENERAL COMMENTS The results of the present manuscript are interesting due to the opportunity to compare the percentage of CTDs overlapping PBC in a cohort of Chinese patients in respect to previous large studies coming from US and Europe. The present study is not innovative, and several large studies on the same argument have been performed worldwide; however, it is interesting to underline that the current research is performed on a relatively large cohort (n=322) and that it investigates an ethnic group not already investigated in previous studies. The paper is well written, however a minor language polishing is required.

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 3087

Title: Connective Tissue Diseases Associated with Primary Biliary Cirrhosis : A Large Population-based Cohort Study

Reviewer code: 00006992

Science editor: Song, Xiu-Xia

Date sent for review: 2013-04-07 14:00

Date reviewed: 2013-04-09 03:25

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 checked="" type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input checked="" 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)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

Wang et al. establish the frequency and clinical features of connective tissue diseases (CTDs) in a cohort of Chinese patients with primary biliary cirrhosis (PBC). The study presented is interesting and sound. Especially the huge number of 322 patients with PBC is convincing. From this study we can conclude that patients with PVC should be examined for other autoimmune disease, such as SS, RP, autoimmune thyroid disease, scleroderma, and SLE. The other way round patients with SS, RP, autoimmune thyroid disease, scleroderma, and SLE should be tested for PBC. Major concerns: The discussion should be supported by explaining or speculating about the pathophysiological mechanisms underlying the co-incidence of PBC and CTD. In a second step limitations of the study should be included in the discussion. The statistical analysis should be recalculated by a testing appropriate for not normally distributed data. Alternatively the authors should show a normal distribution before using the Students t test. A non-parametric alternative to this test can be used such as Kruskal-Wallis one-way analysis of variance. Minor concerns: A lot of blanks between words are missing. Were positive AMA patients positive for AMA M2? This information should be included in Table 1.

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 3087

Title: Connective Tissue Diseases Associated with Primary Biliary Cirrhosis : A Large Population-based Cohort Study

Reviewer code: 00074737

Science editor: Song, Xiu-Xia

Date sent for review: 2013-04-07 14:00

Date reviewed: 2013-04-10 13:35

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 type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<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"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

The authors evaluated the incidence of connective tissue diseases in patients with PBC and compared baseline characteristics according to the type of combined CTDs. Their data was interesting, but some points should be revised to be published. Major comments: 1. The authors presented that AMA was positive in 90.0% in their patients with PBC. How was the patients with negative AMA diagnosed as PBC? In these patients, was liver biopsy performed to confirm PBC? 2. How can you confirm that patients without CTDs really did not have CTDs? Did you perform all evaluations for diagnosis of CTDs in all patients with PBC? 3. How many patients were performed the liver biopsy? Was there any difference in the degree of inflammation or fibrosis between patients with CTD and those without CTD? 4. Could you suggest the indication for the evaluation of CTDs in patients with PBC? Which tests should be performed in these patients to diagnose the CTDs? Do you think that all patients with PBC should be performed the evaluation of all kinds of CTDs? Minor comments: 1. Following part in the RESULTS should be moved to the DISCUSSION: 'The data [16] from a geographically-based PBC patient cohort (n=160) in the UK showed that 53% of patients had at least one additional autoimmune condition. The prevalence of these CTDs in the PBC population were SS (40 cases, 25%), autoimmune thyroid disease (37 cases, 23%), RA (27 cases, 17%), and SSc (12 cases, 8%). None had PM or DM. A study from Bach et al [17] in the USA reported that about 72% of PBC patients were combined with SS, and 20% of PBC patients had joint disease. In an Italian study [18], 170 PBC cases were included, of which 54 had Raynaud's phenomenon (RP). The highest-frequency CTD in these PBC patients was SSc (21 cases, 12.3%). The numbers of overlap cases of SS and PBC, SLE and PBC, RA and PBC, and PM and PBC were: 6 cases (3.5%), 3 cases (1.8%), 3 cases (1.8%), and



Baishideng Publishing Group Co., Limited

Flat C, 23/F., Lucky Plaza,
315-321 Lockhart Road,
Wan Chai, Hong Kong, China

1 case (0.6%), respectively (Table 3).'