

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 3639

Title: The quality of compounded topical 2% diltiazem hydrochloride formulations for anal fissure

Reviewer code: 02441703

Science editor: Zhai, Huan-Huan

Date sent for review: 2013-05-11 13:46

Date reviewed: 2013-05-14 11:07

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input checked="" 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 checked="" 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	BPG Search:	<input 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

Thank you for your contribution to the patients who receive prescription of the topical drugs. I hope that this article can change the system of preparation of topical pharmacy compound and GMP regulations.

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 3639

Title: The quality of compounded topical 2% diltiazem hydrochloride formulations for anal fissure

Reviewer code: 02445726

Science editor: Zhai, Huan-Huan

Date sent for review: 2013-05-11 13:46

Date reviewed: 2013-05-25 07:29

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input checked="" type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input checked="" 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 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 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

Local absorption of Diltiazem depends on skin thickness and local inflammation. It is also proportional to the medication amount. The study is interesting and similar to Azarnoff's study concerning nitroglycerin ointment published in Dis Colon Rectum (2007). The authors noticed a problem which is presumably unknown for gastroenterologists and surgeons - topical 2% diltiazem / recommended by the American Society of Colon and Rectal Surgeons for anal fissure therapy but not approved by the US Food and Drug Administration (FDA) / may be subpotent or suprapotent. Although the study examined 36 prescriptions, but 38.9% preparations lacked content uniformity and about 50% of the preparations did not meet United States Pharmacopoeia specifications for potency. It is relevant for assessment of nonsurgical therapy for anal fissure and side effects. The study is worth publishing.