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### ESPS Peer-review Report

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

**ESPS Manuscript NO:** 4988

**Title:** Beyond white light endoscopy: the role of optical biopsy in inflammatory bowel disease (IBD)

**Reviewer code:** 00070143

**Science editor:** Gou, Su-Xin

**Date sent for review:** 2013-08-07 20:58

**Date reviewed:** 2013-08-07 23:25

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

### COMMENTS TO AUTHORS

You can add figure and photos. Also you should add more your experience in this review.

## ESPS Peer-review Report

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

**ESPS Manuscript NO:** 4988

**Title:** Beyond white light endoscopy: the role of optical biopsy in inflammatory bowel disease (IBD)

**Reviewer code:** 02520738

**Science editor:** Gou, Su-Xin

**Date sent for review:** 2013-08-07 20:58

**Date reviewed:** 2013-08-08 22:02

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 type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	language polishing	BPG Search:	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input checked="" type="checkbox"/> Minor revision
		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

## COMMENTS TO AUTHORS

To: Professor Lian-Sheng Ma Editorial board World Journal of Gastroenterology Title: "Beyond white light endoscopy: the role of optical biopsy in inflammatory bowel disease (IBD)" Dear Editor, We have read through the manuscript and we think that some lacking news should be better re-evaluated: 1) Although this is not a systematic review, the manuscript should be better organized: a. What kind of database did the authors used? b. Which were the key-words adopted? c. How many articles/studies did they find? d. What inclusion/exclusion criteria did they adopt in order to consider or not a literature study in their research? e. How many articles did they excluded? f. How many physicians did perform the evaluation of the articles considered? 2) A flow chart resembling the main steps of the evaluation of literature background, inclusion/exclusion criteria, number of studies considered/excluded, should be provided. 3) A table gathering all the main characteristics of the studies considered, their outcomes, their results, etc should be provided in order to easily recognize the features of the present works.

## ESPS Peer-review Report

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

**ESPS Manuscript NO:** 4988

**Title:** Beyond white light endoscopy: the role of optical biopsy in inflammatory bowel disease (IBD)

**Reviewer code:** 00503820

**Science editor:** Gou, Su-Xin

**Date sent for review:** 2013-08-07 20:58

**Date reviewed:** 2013-08-25 18:44

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 checked="" 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)	<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

**COMMENTS TO AUTHORS** The authors have written on a very interesting topic. Although the subject is of great interest, for the lay, non-technological, readership (people like me) simpler descriptions are needed and this remains my main reservation about the manuscript. At the start I wish to see the history or idea behind development of CLE and EC. Why were they developed and needed at all. The authors have mentioned this in the manuscript but these points need to come in the beginning. I wish to know how technically difficult or applicable it can be in my day to day practice. What expertise is needed ? Can I set up such a system with two people scoping in say a remote area of Africa with one staff member or do I need a mucosal specialist with availability of a full-fledged lab for my use. The technical description on the two techniques reads like a brochure specifications advert and needs to be improved. Also a brief description on pros and cons of the two techniques is also needed. Re clinical applications, a general appraisal of the grades and types of mucosal disease followed by disease description should follow. Again in the order of hierarchy although IBD forms my main practice too, perhaps dysplasia should come first. The individual disease sections need to be shortened – the IBD section for eg is considerably long. The section on ‘Research applications’ needs to be more punchy. I am not very excited to be able to see one too many bacteria in the mucosa – this will not be a great reason for me to start adopting and learning about these techniques.

## ESPS Peer-review Report

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

**ESPS Manuscript NO:** 4988

**Title:** Beyond white light endoscopy: the role of optical biopsy in inflammatory bowel disease (IBD)

**Reviewer code:** 00004063

**Science editor:** Gou, Su-Xin

**Date sent for review:** 2013-08-07 20:58

**Date reviewed:** 2013-09-02 00:58

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 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 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

The paper deals with a review on confocal laser endomicroscopy and endocytoscopy. Both techniques have been extensively described, the data on the possible application discussed in detail. The paper is enjoyable and acceptable as it is, providing minor changes. First, there is the need of figures about the number of papers present in literature, the number of them reviewed, the date of beginning and end of PUBMED ( or other) search. For each paper mentioned the level of evidence should be made explicit. Secondly, in my opinion, there is not any comment on the cost of the procedure itself, the training of the endoscopists , the need of a pathologist or a pathologist formation, the necessity (sometimes legal) to also perform routine histology. These limitations are the true drawbacks that so far influenced the diffusion of the optical biopsy and the lack of comparison data on large series.