

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 5433

Title: Clostridium Difficile and Inflammatory bowel disease: role in pathogenesis and implications in treatment

Reviewer code: 00028527

Science editor: Cui, Xue-Mei

Date sent for review: 2013-09-09 15:46

Date reviewed: 2013-09-12 17:12

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)		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

In general this is a well-written paper about Clostridium difficile and inflammatory bowel disease (IBD). I think the paper has the potential to be accepted after a thoughtful revision as explained below.

Major comments When the authors describe Clostridium difficile is more often observed among IBD patients than the general population, they should consider if surveillance of this population in out-patient clinics might be a confounding factor? In this respect the authors should also keep an eye to make the presentation of their results in a more balanced way which definitely will improve the quality. Thus, the authors should comment that Clostridium difficile infections do not seem to trigger exacerbation of IBD (check for instance PubMed PMID 23267869). When writing about treatment (p. 11) the authors should primarily check if any Cochrane recommendations exist in their area ((they do)), as Cochrane data is the closest we come to evidence based medicine. I do, however, not find any Cochrane references. The authors seem to be very enthusiastic about fidaxomicin and even suggest it should be “a first line agent” (top of p. 13). I wonder if any well performed RCT’s exist to substantiate such a statement? In the respect the authors should also check PMID 23704121. Regarding faecal transplantation mentioned on p. 14 the authors could comment on for instance PMID 24018052. The paper will benefit in quality if the authors try to enhance the level of evidence behind suggestions stated and if they try to diminish their own enthusiastic opinions in a way that the conclusions and the key points appear more appropriate and balanced for the reader of the journal.

Minor comments Key words should be listed alphabetically. Abbreviations should be defined the first time they appear in the manuscript (check for instance IBD in “Introduction”, p. 4, line 4 vs. line 6?) Ulcerative colitis should not be capitalized (“u” on p. 5). Do the authors have any competing interest



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(e.g. supported by the drug company producing fidaxomicin)?

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 5433

Title: Clostridium Difficile and Inflammatory bowel disease: role in pathogenesis and implications in treatment

Reviewer code: 00061698

Science editor: Cui, Xue-Mei

Date sent for review: 2013-09-09 15:46

Date reviewed: 2013-09-17 00:39

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 checked="" 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)		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

The manuscript by Nitzan et al. focus on the role of C. difficile in IBD pathogenesis and the implications for testing and treatment. Overall, it's well written, the references are update and information is interesting. I believe that this review could interest the investigators in the field. I have only several minor comments. - The abstract needs to be largely modified. It contains too many details. It should not discuss about the conflicting data or emphasize the need of further studies to understand better the role of CDI in IBD. In contrast, it should introduce the main information of the review and highlight the aim of the work. - Full names of several abbreviations should be cited at the first time used and not repeated thereafter. For example, full name for IBD should be cited at at line - but not line 8 in page 4, Introduction part. - A figure summarizes the current knowledge on CDI implication in IBD could be added.

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 5433

Title: Clostridium Difficile and Inflammatory bowel disease: role in pathogenesis and implications in treatment

Reviewer code: 02445033

Science editor: Cui, Xue-Mei

Date sent for review: 2013-09-09 15:46

Date reviewed: 2013-09-23 14:41

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

This is a well-written review on the relationship between Clostridium difficile infection and IBD. References are uptodate and sections are correctly arranged. However, I would like to make some comments. - In the diagnosis section some reference to the ECCO guidelines (PMID 21172195) should be made, since specific recommendations on when and when not to test for CDI infections are made, both at initial diagnosis and at disease flares. - I am not sure about the relevance of the unpublished data reported. More details should be provided (ve. Sample size) - The statement on the role of fidaxomicin as a first- line therapy seems risky because there are still only a few randomized trials, and data about cost-effectiveness are somewhat conflicting (PMID 23704121, 23538181) - From a practical point of view it should be advisable to summarize recommendations on diagnosis and management of CDI on IBD patients, perhaps in a table.

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 5433

Title: Clostridium Difficile and Inflammatory bowel disease: role in pathogenesis and implications in treatment

Reviewer code: 02441422

Science editor: Cui, Xue-Mei

Date sent for review: 2013-09-09 15:46

Date reviewed: 2013-09-24 23:24

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

COMMENTS TO AUTHORS

In this article authors reviews the current understanding of the involvement of Clostridium difficile (C. difficile) in inflammatory bowel disease (IBD). The review is interesting and well written. Following modifications needed before final publication: 1. The authors point out that C. difficile is nowadays considered a risk factor for IBD exacerbation. However, the latest study reported that C. difficile is not a common trigger for exacerbations of IBD in clinical practice (Inflamm Bowel Dis 2013;19:2125–2131) . Please cite the important reference and clarify the conflicting conclusions. 2. It would be informative if authors provide a model or 2 showing the relationship between Clostridium difficile infection and IBD. 3. Make sure to provide the full form of all abbreviations that they appear in the manuscript for the first time (For example, line 6 in Introduction). After appearance of abbreviations, authors should adopt the abbreviations in the following manuscript (Line 3 and 7 in Abstract). 4. Please carefully check the spelling. For example, Running title: Clostridium difficile and inflammatory bowel diseaas.