

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 5997

Title: The influence of the psychiatric discomfort to the treatment outcome in patients with the inflammatory bowel disease.

Reviewer code: 00148425

Science editor: Wen, Ling-Ling

Date sent for review: 2013-09-30 13:16

Date reviewed: 2013-11-22 19:48

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)		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

Reviewer's report Title: The influence of the psychiatric discomfort to the treatment outcome in patients with inflammatory bowel disease Version: 1 Date: 22nd November, 2013 Reviewer's report: 1. Is the title posed by the authors well defined? I think "psychiatric comorbidity" is better than psychiatric discomfort. 2. Are the methods appropriate and well described? This is a descriptive review and searching methodology is appropriate. 3. Are the information important? Yes, the authors provide important information about the psychiatric comorbidity and IBD and underlying mechanism. 4. Does the manuscript adhere to the relevant standards for reviews? Yes, it adheres to relevant standard except the last part of the manuscript. 5. Are the discussion and conclusions well balanced and adequately supported by the data? Pg. 19-21: The authors described a list of non-psychiatric medications to treat IBD. I do not think such a lengthy discussion is necessary unless the authors want to highlight psychiatric side effects associated with these medications. 6. Do the authors clearly acknowledge any work upon which they are building, both published and unpublished? Yes, this paper involves extensive review. 7. Is the writing acceptable? Yes, it is acceptable except a few atypical terms like medicamenous treatment. Other points: Some of the points made in the background and discussion need clarification: Abstract: "Medicamentous" treatment: it is an uncommon term. I suggest the authors to use psychotropic medication. Abstract: None of mentioned psychiatric treatment methods could not be stressed as golden standard, because having also side effects and even worsening IBD symptoms. (Psychotherapy does not worsen IBD symptoms). Pg. 4: "Cingulate atrophy in CD leads to targeting chronic pain and psychiatric symptoms via cingulate-mediated therapies." What are cingulate-mediated therapies? How does one



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treat a deep focal neuroanatomical structure like cingulate gyrus? Can the authors double check on this cingulate-mediated intervention and offer more explanation? Pg.5 thalamus (35/37) What does (35/37) mean? Pg.11 Why the subtitle “psychotherapy” is at the top while the authors were discussing medication underneath? Pg 13 “Some authors argued whether antidepressants may in fact cause dependence” The word, “dependence” is incorrect and does not apply to antidepressants. Substance cause dependence if the substance can change a person physiologically and the person develops tolerance to such substance and needs to consume more and more of this substance to achieve the same effect. This does not apply to antidepressants.

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 5997

Title: The influence of the psychiatric discomfort to the treatment outcome in patients with the inflammatory bowel disease.

Reviewer code: 02465274

Science editor: Wen, Ling-Ling

Date sent for review: 2013-09-30 13:16

Date reviewed: 2013-12-09 03:33

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	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	language polishing	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

Well-written review. The audience of readers will benefit from additional discussion about high perceived stress and increased risk flare by exploring neuroendocrine mechanisms of stress (see page 6).