CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[ ] Grade A (Excellent)	[ ] Grade A: Priority Publishing	Google Search:	[ ] Accept
[ ] Grade B (Very good)	[Y] Grade B: minor language polishing	[ ] Existed	[ ] High priority for publication
[ ] Grade C (Good)	[ ] Grade C: a great deal of language polishing	[ ] No records	[ ] Rejection
[Y] Grade D (Fair)		BPG Search:	
[ ] Grade E (Poor)	[ ] Grade D: rejected	[ ] Existed	[ ] Minor revision
		[ ] No records	[Y] Major revision

COMMENTS TO AUTHORS

It is not clear what antiTNFα therapy has to do with IL17A or IL23 levels, or how these levels may be related to skin lesions.   What is shown here is that IL17A, IL23 and IFNγ levels are increased in CD patients, and that IL17A and IL23 levels, in turn, are higher in CD patients with skin lesions. This observation is of potential interest and authors could then write e brief manuscript on this. However, by no means have authors proved that the therapy with antiTNFα has something to do with high cytokine levels (are cytokine levels in patients prior to therapy available? If so, they should be given), nor that the cytokine levels are involved in the skin lesions (certainly, the levels in the group of CD patients with skin lesions show higher levels than patients with no lesions, but the levels in the general group of CD patients is much higher than in the control group. How do authors discard other elements, not presently studied, as the causative agent of the skin lesions?) In addition, the regression values shown are very poor, regardless of the P value achieved. These are different parameters to consider. The "r" value will show how one variable may affect the other. Achieving an "r" value of 0.47 means that the change in one variable is explained only by a 47% by a change in the other one. The "P" value shows that the points obtained fit in a regression line with a significant (or not) confidence value, but the regression line is not good. Thus, all "r" values shown, the pertinent results and discussion commenting them should be left out.   English is well written, and only some corrections may be needed. Therre are some misspellings (egzematiforms) and some expressions may be changed("pathomechanism" to "pathogenic mechanism")

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 7328

Title: Skin lesions induced by anti-TNF-α therapy in patients with Crohn's disease: association with IL-17A, IL-23 and IFN-γ

Reviewer code: 02461935

Science editor: Gou, Su-Xin

Date sent for review: 2013-11-14 14:32

Date reviewed: 2013-11-22 23:04

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[ ] Grade A (Excellent)	[Y] Grade A: Priority Publishing	Google Search:	[ ] Accept
[Y] Grade B (Very good)	[ ] Grade B: minor language polishing	[ ] Existed	[Y] High priority for publication
[ ] Grade C (Good)	[ ] Grade C: a great deal of language polishing	[ ] No records	
[ ] Grade D (Fair)		BPG Search:	[ ]Rejection
[ ] Grade E (Poor)	[ ] Grade D: rejected	[ ] Existed	[ ] Minor revision
		[ ] No records	[ ] Major revision

COMMENTS TO AUTHORS

The authors present a very nice and interesting manuscript. Only one further question should be adressed as minor revision: Is there a significant correlation between the induction of skin lesions by anti-TNF antibodies and the response to treatment?

ESPS Peer-review Report
Name of Journal: World Journal of Gastroenterology
ESPS Manuscript NO: 7328
Title: Skin lesions induced by anti-TNF-α therapy in patients with Crohn's disease: association with IL-17A, IL-23 and IFN-γ
Reviewer code: 00503612
Science editor: Gou, Su-Xin
Date sent for review: 2013-11-14 14:32
Date reviewed: 2013-12-19 06:21

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[ ] Grade A (Excellent)	[ ] Grade A: Priority Publishing	Google Search:	[ ] Accept
[ ] Grade B (Very good)	[Y] Grade B: minor language polishing	[ ] Existed	[ ] High priority for publication
[Y] Grade C (Good)	[ ] Grade C: a great deal of language polishing	[ ] No records	
[ ] Grade D (Fair)		BPG Search:	[ ] Rejection
[ ] Grade E (Poor)	[ ] Grade D: rejected	[ ] Existed	[ ] Minor revision
		[ ] No records	[Y] Major revision

COMMENTS TO AUTHORS

I appreciate the opportunity to review this manuscript. This is a small study trying to correlate plasma levels of ILs and IFN with that of the appearance of skin lesions with treatment. A few comments/questions: 1. Why did you only include the low number that you did? I understand the need to have a correlation with a control group, 2. Please explain the above with the fact that 30 of your patients are treated with 3 different medications. This lends a large degree of potential bias into the study, yet is not addressed. 3. In the 18 patents that had no prior similar skin lesions, there is a failure to comment on those that had a large/small or no substantial skin lesions at all- although your exclusion criteria addressed some of these factors, it didn't address those that could have had an underlying (or history) of hypersensitivity. 4. I do not understand the reason that you would not draw baseline levels of the IL and INF? How can you understand if this is induced by an intrinsic problem (i.e. should never be treated) or a change with the introduction of therapy (i.e. need a dose change or to be removed). 5. Were you able to retest these patients and clinically observe them to see if these lesions and levels were reversible? How can you be sure then that this is not "true-true unrelated"?

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 7328

Title: Skin lesions induced by anti-TNF-α therapy in patients with Crohn's disease: association with IL-17A, IL-23 and IFN-γ

Reviewer code: 01557574

Science editor: Gou, Su-Xin

Date sent for review: 2013-11-14 14:32

Date reviewed: 2013-12-24 20:31

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[Y] Grade A (Excellent)	[Y] Grade A: Priority Publishing	Google Search:	[Y] Accept
[ ] Grade B (Very good)	[ ] Grade B: minor language polishing	[ ] Existed	[ ] High priority for publication
[ ] Grade C (Good)	[ ] Grade C: a great deal of language polishing	[ ] No records	
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[ ] Grade E (Poor)	[ ] Grade D: rejected	[ ] Existed	[ ] Minor revision
		[ ] No records	[ ] Major revision

COMMENTS TO AUTHORS

Dear Author, It is very nice study and gives us important informations. Therefore, It should be published without any revision.   It is well documanted. Sincerely yours. Prof. Dr. Vedat Goral