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## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 16183

**Title:** Antiphospholipid antibodies (APLA) are associated with Crohn’s disease but they are not associated with disease phenotype or disease course in large prospective cohort study

**Reviewer’s code:** 00035859

**Reviewer’s country:** India

**Science editor:** Ya-Juan Ma

**Date sent for review:** 2015-01-04 16:28

**Date reviewed:** 2015-01-10 10:04

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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"/> The same title	<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"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input type="checkbox"/> No	

### COMMENTS TO AUTHORS

This article relooks at the role of anti phospholipid antibodies in IBD. In a cohort of 458 patients and reviews the earlier literature. This is well-designed and conducted study and gives clear conclusion that APLAs are not associated with disease phenotype including the thrombosis and do not need further study unless a newer aspect comes in future. The only negative point about this article is that it is long. It may be worth reducing the number of tables



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**ESPS manuscript NO:** 16183

**Title:** Antiphospholipid antibodies (APLA) are associated with Crohn’s disease but they are not associated with disease phenotype or disease course in large prospective cohort study

**Reviewer’s code:** 00034489

**Reviewer’s country:** Japan

**Science editor:** Ya-Juan Ma

**Date sent for review:** 2015-01-04 16:28

**Date reviewed:** 2015-01-13 09:15

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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"/> The same title	<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"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		BPG Search:	<input checked="" type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

**COMMENTS TO AUTHORS**

The authors show the analysis of antiphospholipid antibodies in patients with IBD using prospective cohort study and small systematic review. The manuscript has much information in APLA. However, there are several concerns with regards to the investigation. Please see below. Major comments 1) The authors detect significant differences in only a few antibodies among APLA between IBD and APLA. The manuscript is illegible manuscript because the authors load up on so many data in the manuscript. Authors should make choice of data to make easily comprehensible manuscript. Minor comments 1) There are so many abbreviations in the manuscript. Alleviations should be decreased. 2) Table 1, 4 and 6 should be condensed. 3) The note of Table 3 is confused. 4) Figure 2 and 3 are unnecessary.



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**ESPS manuscript NO:** 16183

**Title:** Antiphospholipid antibodies (APLA) are associated with Crohn’s disease but they are not associated with disease phenotype or disease course in large prospective cohort study

**Reviewer’s code:** 02997185

**Reviewer’s country:** Taiwan

**Science editor:** Ya-Juan Ma

**Date sent for review:** 2015-01-04 16:28

**Date reviewed:** 2015-02-03 20:31

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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"/> The same title	<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"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		[Y] No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		[Y] No	

**COMMENTS TO AUTHORS**

The manuscript by Sipeki et al described the association between Antiphospholipid antibodies (APLA) and Crohn’s disease in a prospective cohort study. Several comments are given as follows. The presence of more different types of anti-phospholipid antibodies measured by different assays has higher tendency to develop thromboembolic events. Thus, to those patients with positivity of several different types of APLA should be grouped and analyzed individually to see if the co-existence of several APLA may have the higher tendency to develop thromboembolic events compared to those with only one type of APLA. The table presentation is hard to follow and should be effectively summarized and presented. Keep only the valuable messages in the table. Appropriateness of statistical analysis may need to be evaluated by an expert in the field. Abbreviations used in the text should be consistent. For example, HCONT in table 3 should be replaced by HC in table 1. English-editing is required to improve the quality of this report.