

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 17791

Title: Effect of anti-TNF α antibodies on oxidative stress in patients with Crohn's disease

Reviewer's code: 03001890

Reviewer's country: Canada

Science editor: Jing Yu

Date sent for review: 2015-03-27 08:31

Date reviewed: 2015-04-25 22:10

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

1. I reviewed with interest your paper titled "Effect of anti-TNF α antibodies on oxidative stress in patients with Crohn's disease", my first impression when I read the title was that this paper addresses the impact of anti drug antibodies (ADAs) on oxidative stress, which is why I believe the title is misleading and not appropriate. I suggest you change it to "Effect of TNF α antagonists on oxidative stress in patients with Crohn's disease". 2. The abstract is appropriate and summarizes the findings well. 3. In the second paragraph of your discussion, you eluded briefly to how such findings impacted clinical practice in other specialties, I would suggest you elaborate further to convince the reader that these preliminary findings may have promise. 4. I would however add to the discussion section another obvious limitation of the study: the correlation is not adjusted for certain confounders, namely serum drug concentrations, presence or absence of anti drug antibodies, presence or absence of concomitant immunosuppression (although the percentage of those on AZA concomitantly was low in this study (7%)), baseline CRP, and finally that disease activity was based entirely on clinical symptoms (CDAI), which is known to poorly correlate with endoscopic disease activity in CD.