BAISHIDENG PUBLISHING GROUP INC
8226 Regency Drive, Pleasanton, CA 94588, USA
Telephone: +1-925-223-8242 Fax: +1-925-223-8243
E-mail: bpgoffice@wjgnet.com http://www.wjgnet.com

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology
ESPS manuscript NO: 33137
Title: Inflammatory bowel disease in liver transplanted patients
Reviewer's code: 02462265
Reviewer's country: Australia
Science editor: Yuan Qi
Date sent for review: 2017-02-07 13:13
Date reviewed: 2017-02-20 18:47

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
[Y] Grade A: Excellent	[ ] Grade A: Priority publishing	Google Search:	[ ] Accept
[ ] Grade B: Very good	[Y] Grade B: Minor language polishing	[ ] The same title	[ ] High priority for publication
[ ] Grade C: Good	[ ] Grade C: A great deal of language polishing	[ ] Duplicate publication	[ ] Rejection
[ ] Grade D: Fair	[ ] Grade D: Rejected	[ ] Plagiarism	[ ] Minor revision
[ ] Grade E: Poor		[Y] No	[Y] Major revision
		BPG Search:	
		[ ] The same title	
		[ ] Duplicate publication	
		[ ] Plagiarism	
		[Y] No	

COMMENTS TO AUTHORS

MANUSCRIPT TITLE: WJG Manuscript-20170128152907 - Inflammatory bowel disease in liver transplanted patients MINOR POINTS: INTRODUCTION: ? This is brief and could include additional information on the following - o The indications for OLT in PSC patients should be discussed o The differences in prognosis and management in PSC in CD vs UC o Small duct vs large duct PSC o ? RISK FACTORS ASSOCIATED WITH EXACERBATION OR DE NOVO IBD AFTER LIVER TRANSPLANTATION ? Page 2 – Type – "Tree different patterns of disease….." ? Is risk of recurrent or de novo IBD after OLT different between CD and UC patients? ? CMV mismatching is only discussed briefly – how important is this in work up for transplanation? ? Is the protective effect of 5-ASA against disease flares in only UC patients – presumably so? ? Regarding post OLT immunosuppressive regimens it is suggested to use cyclosporine instead of tacrolimus and azathioprine instead of mycophenylate – are these recommendations supported by guidelines – eg from ECCO? ? Similarly, in patients on azathioprine (or anti-TNF agents) prior to OLT should these be routinely stopped after OLT? TREATMENT OF POST-TRANSPLANTATION INFLAMMATORY BOWEL DISEASE ? These recommendations are not specific to IBD management

in the post OLT patient ? These two sentences are contradictory - "No significant drug interaction between 5-ASA and immunosuppressant's are observed. In some cases 5-ASA may interact with azathioprine and increase the risk of leukopenia" There are several papers showing the interaction of 5-ASA and thiopurines leading to increased 6TGN levels (Eg. . 5-aminosalicylate therapy is associated with higher 6-thioguanine levels in adults and children with inflammatory bowel disease in remission on 6-mercaptopurine or azathioprine. Hande S, Wilson-Rich N, Bousvaros A, Zholudev A, Maurer R, Banks P, Makrauer F, Reddy S, Burakoff R, Friedman S. Inflamm Bowel Dis. 2006 Apr;12(4):251-7). ? Table 1 is a large table that describes only 31 patients on A-TNFs. Of more value would be a larger table showing response rates to all agents used to treat IBD post IBD – it would not need to be so detailed for each agent. ? There should be a separate subheading on management of recurrent PSC post OLT. ? There should be a separate subheading on management of rejection post OLT ? COLORECTAL CARCINOMA (CRC) ? With reference to CRC surveillance the scenic guidelines and chromoendoscopy should be referenced. ? CONCLUSIONS ? The authors suggest "considering" cyclosporine and azathioprine as anti-rejection therapy. This is vague and the readers need stronger recommendations. MAJOR POINTS: ? This manuscript is too brief and inconclusive in its present form. More information is required in several areas as is suggested above. ? Most important is specific data, and therefore recommendations, on IBD management in the post OLT population versus the non-transplant population. ? A table summarizing key recommendations in this population would be useful.