

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 31025

Title: Correlation of endoscopic disease severity with PUCAI score in children and young adults with ulcerative colitis

Reviewer's code: 00036951

Reviewer's country: Italy

Science editor: Yuan Qi

Date sent for review: 2016-10-28 15:44

Date reviewed: 2016-11-14 02:53

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input checked="" type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" 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 checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		BPG Search:	<input 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 manuscript is well written and there are not need to major revisions. Only a some clarifications to add on the text: 1. in the background of the study, the Authors reported that PUCAI is not reliable in clinical practice or in clinical trials. Why ? and can be useful to add some references about it, 2. in the conclusions, the sigma's Mayo score is more reliable than rectum to correlate to PUCAI, can the authors to explain why ?

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 31025

Title: Correlation of endoscopic disease severity with PUCAI score in children and young adults with ulcerative colitis

Reviewer's code: 02729987

Reviewer's country: Portugal

Science editor: Yuan Qi

Date sent for review: 2016-10-28 15:44

Date reviewed: 2016-12-17 20:13

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 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"/> Duplicate publication	
<input checked="" type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input checked="" type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
		BPG Search:	<input 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

After evaluation I suggest that this study should be rejected mainly because of several major methodological limitations: ? Evaluation of the endoscopic Mayo score was done by the review of photographs obtained in a preview colonoscopy. This is very limitative because the most severe colon/rectum area affect may have not be recorded, some images may not have the best quality for assessment, ? In some cases the PUCAI score was calculated based on data abstracted from the chart. This was done retrospectively, based on the chart data and accurate data can not be guaranteed. ? Endoscopic and clinical assessments were not always performed on the same day. Median time was 14 days. So how can the authors assure that this data area accurate for comparison? ? PUCAI scores were obtained before colonoscopy in 30% of patients, and after colonoscopy in 70% of patients. How can the authors explain this? Clinical activity is a very good indication for colonoscopy and normally obtain before the procedure. In this study the main indication for colonoscopy was disease activity so should not the PUCAI score have been calculated and recorded before? ? Patients that were tapering steroids also excluded?