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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 31408

Title: Low-FODMAP Diet Reduces Irritable Bowel Symptoms in Patients with Inflammatory Bowel Disease

Reviewer's code: 00068090

Reviewer's country: Spain

Science editor: Ze-Mao Gong

Date sent for review: 2016-11-17 15:52

Date reviewed: 2016-12-15 05:57

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

COMMENTS TO AUTHORS

The author showed in their study that Low-FODMAP Diet Reduces Irritable Bowel Symptoms in Patients with Inflammatory Bowel Disease in remission while the question of the efficacious role of LFD in patients with mild-to-moderate-activity remains inconclusive, MAJOR COMMENTS: 1) The authors should have shown the possible changes in inflammatory cytokines, microbiota profile, and SCFAs, which may have consequences for gut health with the low FODMAP diet. 2) The authors should consider the patients adherent to the diet. High adherence was associated with longer duration of dietary treatment. It is important to consider if the majority of patients were satisfied with the dietary treatment and did not quit the dietary course before planned. The probability of patients discontinuing dietary management increases with duration of dietary course, as motivation tends to dwindle. 3) While beneficial for symptom reduction, there is evidence suggesting that a low FODMAP diet also has negative effects on microbiota. This was first suggested in a trial where a dietitian-taught low FODMAP diet reduced relative abundance of fecal Bifidobacteria spp in IBS subjects. For this reason, evaluation of gut microbiome composition and, perhaps more importantly



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the microbiome's metabolic byproducts, may help further elucidate the mechanism of the low FODMAP diet and its potential biological implications 4) Other indications for this more gentle restriction include patients at risk of nutritional inadequacy or who have other dietary restrictions, which may again encompass the IBD population. Because of the complex and individual nature of an FODMAP restriction, implementation should be done in guidance with a dietitian well versed in IBD. In addition to appropriate FODMAP manipulation, a dietitian will assess and closely monitor nutritional adequacy with dietary restriction and manage as appropriate, including patients in whom nutrient absorption is impaired or dietary intake is altered



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Name of journal: World Journal of Gastroenterology

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Title: Low-FODMAP Diet Reduces Irritable Bowel Symptoms in Patients with Inflammatory Bowel Disease

Reviewer's code: 00503587

Reviewer's country: New Zealand

Science editor: Ze-Mao Gong

Date sent for review: 2016-11-17 15:52

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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
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<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No	<input type="checkbox"/> Major revision
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		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input type="checkbox"/> No	

COMMENTS TO AUTHORS

Specific Comments: 1. The Methods of the Abstract contains information that would typically be found in the Results section, Suggest to move this. 2. It would've been more helpful if all patients were in remission, with objective info to confirm this. One would not expect a reduction in inflammatory scores. 3. In the Introduction, there is only one irritable bowel syndrome (not many) 4. The point in the first [paragraph of the Intro is that patients with IBD may have only symptoms (similar to those seen in IBS alone) that reflect coincident IBS in this patients. This text could be more clear.. 5. The authors refer to two studies (17 and 18) prior to establishing the aim of their work. It could be more clearly stated why this study adds to the other two reports 6. The first part of the RESULTS does not have a subheading. 7. The authors note in the discussion that the LFD did not lead to any increase in objective inflammatory markers. They should also state that the dietary intervention did not improve inflammation either. 8. The Table headings could be enhanced to be more clear. Table 4 for example is incomplete and vague 9. There are many figures and tables. some showing negative data could be excluded and/or made as supplementary figures. Do all need to be



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included?