

## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 30279

**Title:** Simple pain measures reveal psycho-social pathology in patients with Crohn's disease

**Reviewer's code:** 03663245

**Reviewer's country:** Spain

**Science editor:** Jing Yu

**Date sent for review:** 2016-09-26 17:00

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input checked="" 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"/> Plagiarism	<input 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

It is true that one of the most characteristic symptoms of the CD (Chron's Disease) is the abdominal pain and there are many studies that demonstrate so in relation with the affected people's concern. It is in fact an issue that has been widely studied as shown by the authors in the literature cited along the text as well as the relationship between coping strategies and / or psychological ones. The manuscript also considers publications about the positive relationship shown through the disease ongoing as well as the adaptation process and the negative responses in case of dysfunctional coping, as it can be seen in the references listed on page 3. However, few concrete studies regarding CD have been outlined in this manuscript. Introductory paragraph does not clarify the need to conduct this study. It would be necessary to talk broader about the pain along with other symptoms, towards enhancing the importance of the study. That's why other symptoms as the need to go to the toilet urgently is also important for people who suffers CD and should have also been remarked. It has not been mentioned how long the sample had suffered the disease and how that fact could modify the person's experience as those just diagnosed do not cope with the disease like the ones who suffer CD



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for years. In addition, the severity of the CD varies greatly the confrontation. Within the two methods of information withdrawal (in the hospital and website), there are not descriptions about the characteristics of the study contexts. It is important to know if there are differences on the sociodemographics aspects which could alter the findings. The number of questionnaires obtained from the website and paper has not been specified in the study. Author/s should have considered that the timeframe available for the answer could alter the findings. In the ethical considerations it has not been explained if there was an informed consent for the participants. There is not any comment about the previous information that every participant received. The code number of the committees of ethics has not been specified. The questionnaires were translated into the Hebrew. It has not been mentioned if those translations were validated. If so, please provide references to justify the validation. There is a lack of information about the standardizing procedures and should be provided by the author/s. Authors do not refer to any pilot study previously being done and it would have been adequate according to the design. The Results and Discussion are difficult to be understood. It would be recommendable to add subtitles related to different contents in both parts of the manuscript to make them easily understood and more comprehensive.

## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 30279

**Title:** Simple pain measures reveal psycho-social pathology in patients with Crohn's disease

**Reviewer's code:** 03529146

**Reviewer's country:** Netherlands

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" 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
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		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

Using a variety of self-report measures, this cross-sectional survey study has investigated the correlates of pain in a large sample of patients with Crohn's Disease (CD). The study recoded the pain items in Patient Harvey-Bradshaw Index (P-HBI), Short Form Health Survey (SF-36), and Short Inflammatory Bowel Disease Questionnaire (SIBDQ) into 4 identical scores to construct a similar measure across scales. Using univariate and multinomial logistic regression analyses, the study analyzed the association between psychosocial variables and the degree of pain. Notwithstanding its limitations, this study provides some insight into the correlates of pain in CD. My comments and questions regarding the study are as follows: 1- This is a nicely written paper. However, the conclusion does not align with the aim of the study. The aim is "to measure pain intensity and its postulated psycho-social associations in adult CD patients"; the conclusion is "P-HBI, SF-36 and SIBDQ were useful measures to reveal a variety of psycho-social pathologies in CD patients. Application of these measures in the clinic setting will reveal patients needing psychological treatment". First, P-HBI and SIBDQ measure disease activity; the SF-36 measures a completely

different construct, general health. Second, these scales (also the selected pain items) may be associated with psycho-social pathologies –a very broad term–, but they are not designed to evaluate psychopathology. There are certainly better –valid– options to measure psychopathology, e.g., Brief Symptom Inventory applied in the present study. Obviously, pain is linked to psychiatric problems and should, therefore, be a warning sign for clinicians to further explore psychiatric comorbidity. However, claiming that “Application of these measures in the clinic setting will reveal patients needing psychological treatment.” is simply an overstatement. I strongly suggest authors reevaluate the results, in accordance with their aim, and reformulate their conclusion based on their findings.

2- To measure pain, three items from three different scales with different scoring ranges were used. To conform with P-HBI, which has originally four categories from none (0) to severe (3), authors reformulated categories in SIBDQ and SF-36 based on the frequency of patients’ responses. Could you please clarify the reclassification procedure? At this stage, it reads as if the cut-offs to reformulate categories were arbitrarily chosen.

3-Bias may arise as a result of different sampling methods (website and onsite). Better use a mixed modeling that takes into account of clustering.

4-Authors state: “Our study is the first detailed attempt to our knowledge to unravel the factors that are associated with increased severity of pain in CD patients without psychological or psychiatric comorbidities.”. However, it is not clear in the methods how patients with psychological or psychiatric comorbidities were excluded.

5- The rate of psychiatric disorders, particularly depressive disorders, are increased in CD. Pain symptoms are also more likely to occur in depression. Evidence suggest that anti-TNF treatment reduces depressive symptoms in CD patients, in part, independent of disease activity (Guloksuz et al. Depressive symptoms in Crohn's disease: relationship with immune activation and tryptophan availability. In: PLoS One. 2013;8(3):e60435.). It would be very interesting to explore whether the degree of pain is different in patients treated with biologics, in association with psychosocial stress. Please address this in the paper.

6- The cross-sectional design of the study does not allow for making causal inferences such as: “While these observations do not imply directionality, the point is made that keeping CD patients at work will likely lead to overall improvement in both their physical and economic well-being.” It is also plausible that the overall improvement in physical well-being helps patients with employment