



PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 39025

Title: Endoscopy in inflammatory bowel disease: Role in diagnosis, management, and treatment

Reviewer's code: 02822560

Reviewer's country: Japan

Science editor: Ze-Mao Gong

Date sent for review: 2018-03-30

Date reviewed: 2018-04-06

Review time: 7 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input checked="" type="checkbox"/> Accept	Peer-Review:
<input checked="" type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

The authors summarize concisely and explain clearly roles of various kinds of endoscopy in diagnosis, management, and treatment, especially in respect with endoscopic scoring systems. Therefore, this review seems to provide gastroenterologists



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or clinicians with useful overview and outlook on future. Major The authors are recommended to describe the management for pouch stricture as one of main post-surgical management. Minor 1) Item IV is missing in the “ENDOSCOPY IN DISEASE DIAGNOSIS” 2) The last sentence on page9, bottom, cannot make sense. 3) What “EUA” on page 10, line8, stand for ?

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

- The same title
- Duplicate publication
- Plagiarism
- No

BPG Search:

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PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 39025

Title: Endoscopy in inflammatory bowel disease: Role in diagnosis, management, and treatment

Reviewer’s code: 02446483

Reviewer’s country: Canada

Science editor: Ze-Mao Gong

Date sent for review: 2018-05-05

Date reviewed: 2018-05-08

Review time: 3 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	(General priority)	Peer-reviewer’s expertise on the topic of the manuscript:
<input type="checkbox"/> Grade E: Do not publish	<input type="checkbox"/> Grade D: Rejection	<input checked="" type="checkbox"/> Minor revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Major revision	<input type="checkbox"/> General
		<input type="checkbox"/> Rejection	<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

The authors focus on the roles, indications, and limitations of endoscopy in IBD. There is also discussion on the most commonly used endoscopic scoring systems, as well as special considerations in post-surgical patients. Moreover, the authors target the role of



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endoscopy in the diagnosis and management of fistulas and strictures. As working in the IBD field, I consider the manuscript well written and the authors have targeted multiple targets with excellence. However, I like to see endoscopic pictures from different Mayo score and Rutgeerts score.

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PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 39025

Title: Endoscopy in inflammatory bowel disease: Role in diagnosis, management, and treatment

Reviewer’s code: 02995354

Reviewer’s country: India

Science editor: Ze-Mao Gong

Date sent for review: 2018-05-05

Date reviewed: 2018-05-13

Review time: 8 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	(High priority)	<input type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good		<input type="checkbox"/> Accept	<input checked="" type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	(General priority)	Peer-reviewer’s expertise on the topic of the manuscript:
<input type="checkbox"/> Grade E: Do not publish	<input type="checkbox"/> Grade D: Rejection	<input checked="" type="checkbox"/> Minor revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Major revision	<input type="checkbox"/> General
		<input type="checkbox"/> Rejection	<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

1. Please include an introductory paragraph at the beginning of your review article, rather than going directly to the “Endoscopy in Disease Diagnosis” section. 2. I would strongly suggest to include endoscopic images of some of the things which you have



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discussed in this review article, to improve the cosmetic look of your paper. It would be really nice if you specifically show chromoendoscopic images of dysplastic lesions in IBD and images of endoscopic dilatation and stricturotomy of IBD strictures. 3. In the section on Post-surgical Management, “Rutgeerts score” should be written instead of “Rutgeerts anastomotic score”. 4. While discussing Endoscopic therapy in IBD, please mention: a) The maximum balloon diameter used for stricture dilatation (It is 20 mm in most of the studies, while few aggressive endoscopists go up to 25 mm) b) Stricture with fistula is a contraindication for endoscopic dilatation; such cases are best managed surgically 5. Recently, a landmark paper has come up on endoscopic fistulotomy of IBD-related fistulas by Prof. Bo Shen from Cleveland Clinic (GIE 2018). The authors reported a very high response rate (89.6%) in carefully selected IBD patients with fistulas. I think this paper needs to be cited and briefly discussed in your review.

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