

## PEER-REVIEW REPORT

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

**Manuscript NO:** 80280

**Title:** Seronegative spondyloarthropathy-associated inflammatory bowel disease

**Provenance and peer review:** Invited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 02941507

**Position:** Editorial Board

**Academic degree:** FACG, FEBG, MD, PhD

**Professional title:** Associate Professor, Staff Physician

**Reviewer's Country/Territory:** Greece

**Author's Country/Territory:** Taiwan

**Manuscript submission date:** 2022-09-30

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-10-01 09:47

**Reviewer performed review:** 2022-10-04 11:02

**Review time:** 3 Days and 1 Hour

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer</b>	Peer-Review: <input type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous

statements

Conflicts-of-Interest: [ ] Yes [Y] No

## SPECIFIC COMMENTS TO AUTHORS

This is a high-level review on Seronegative spondyloarthropathy-associated inflammatory bowel disease. The authors described and analyzed in detail all types of arthropathies associated with IBD with the epidemiology, pathogenesis, clinical picture, diagnosis, and treatment of these conditions based on the data of the current literature. The review would be useful to both rheumatologists and gastroenterologists by helping them efficiently diagnose and treat this kind of patients. Another important element of the study is the authors' reference to data from Asian countries (Mainly China) where the frequency of IBD has been increasing significantly in recent years. I think the study should be published with minor caveats. I assume that table 2 regarding the clinical and laboratory data and the treatment of IBD patients is primarily for the rheumatologists' colleagues since the described data are essentially familiar to all gastroenterologists and therefore the table could be omitted. However, it can remain as I mentioned above to inform the rheumatologist colleagues. Likewise, the data in Figures 1 and 2 as well as Table 4 with the data of patients with ankylosing spondylitis and IBD may be useful to rheumatologist colleagues. For table 6 I assume there is permission to publish from the FDA. References 104 and 109 are identical. The authors should keep one and delete the other, certainly changing the numbering of the remaining references.

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**Peer-review model:** Single blind

**Reviewer's code:** 06332646

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Attending Doctor, Staff Physician

**Reviewer's Country/Territory:** United States

**Author's Country/Territory:** Taiwan

**Manuscript submission date:** 2022-09-30

**Reviewer chosen by:** Dong-Mei Wang

**Reviewer accepted review:** 2022-11-05 16:45

**Reviewer performed review:** 2022-11-10 04:54

**Review time:** 4 Days and 12 Hours

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Peer-reviewer</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous

statements

Conflicts-of-Interest: [ ] Yes [Y] No

## SPECIFIC COMMENTS TO AUTHORS

The article is focused on the association of IBD with seronegative spondyloarthropathy. The title reflects the main subject/hypothesis of the manuscript. The abstract summarizes and reflects the work described in the manuscript succinctly. Key words: matching the manuscript. Background. The Manuscript adequately describes the background, present status, and aim. Methods. The manuscript does not provide any detailed methodology. Its a review article. Results. Not applicable. Discussion. The manuscript highlighted the key points concisely, clearly, and logically; and includes relevance to clinical practice sufficiently. Illustrations and tables. Are sufficient, of good quality, and appropriately illustrative of the paper's contents. Biostatistics. Not applicable. References. Seem appropriate and adequate, and include recent publications. Quality of manuscript organization and presentation. The manuscript is concisely, and coherently organized and presented. Research methods and reporting. Not applicable. Minor corrections: Consider rephrasing the last sentence in the abstrast; which also appears twice in similar wording in the manuscript. 1. "A tight collaboration between gastroenterologists and rheumatologists with mutual referral for early and accurate diagnosis to initiate appropriate and prompt therapy is required in these complex clinical scenarios." 2. In the discussion section, instead of short forms, e.g. "AS, or similar" - please consider using long forms as paragraph titles for better reader experience. 3. Page 7/47. consider rephrasing the term "frustrated outcomes" 4. Page 13/47. Provide reference for sentence "..... therapy is indicated for the identification of C. trachomatis infection."

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**Peer-review model:** Single blind

**Reviewer's code:** 05382317

**Position:** Peer Reviewer

**Academic degree:** FRCS (Hon), MD

**Professional title:** Doctor, Surgeon

**Reviewer's Country/Territory:** China

**Author's Country/Territory:** Taiwan

**Manuscript submission date:** 2022-09-30

**Reviewer chosen by:** Dong-Mei Wang

**Reviewer accepted review:** 2022-11-05 05:02

**Reviewer performed review:** 2022-11-13 09:51

**Review time:** 8 Days and 4 Hours

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous

**statements**Conflicts-of-Interest: [ ] Yes [ **Y** ] No**SPECIFIC COMMENTS TO AUTHORS**

Inflammatory bowel disease is a common extra-articular manifestation in SpA, whereas extraintestinal manifestations in IBD mostly affect the joints. The study reviewed the coexistence of IBD in different subtypes of seronegative SpA patients and suggested the need for close collaboration between gastroenterologists and rheumatologists with mutual referral from early accurate diagnosis to appropriate prompt therapy. These findings have guidance for clinicians in this complex clinical scenario.