



PEER-REVIEW REPORT

Name of journal: *World Journal of Gastroenterology*

Manuscript NO: 87126

Title: Global burden of inflammatory bowel disease 1990-2019: A systematic examination of the disease burden and twenty-year forecast

Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer’s code: 01587889

Position: Editorial Board

Academic degree: MD, MSc, PhD

Professional title: Academic Editor, Consultant Physician-Scientist, Professor

Reviewer’s Country/Territory: United States

Author’s Country/Territory: China

Manuscript submission date: 2023-07-28

Reviewer chosen by: Geng-Long Liu (Quit 2023)

Reviewer accepted review: 2023-09-04 02:35

Reviewer performed review: 2023-09-12 17:05

Review time: 8 Days and 14 Hours

Scientific quality	<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 Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation



Scientific significance of the conclusion in this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
Language quality	<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
Conclusion	<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
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

Well summarized Paper. Chengjun Li et al. is a comprehensive analysis of literature review on the burden of IBD from 1990 to 2019 at the global, regional, and national perspectives. The association and significance of various demographic indicators were first analyzed in different geographic areas. Further, they forecast the number and incidence rate of IBD for the next twenty years from 2019 to 2039 based on the R software and validated the reliability of the results anticipating providing new hypotheses for the management to alleviate the global burden of IBD. It is now clear that IBD is alarmingly evolving in young adults worldwide and now contemplated to be an emergent global disease. IBD, which encompasses Crohn's disease (CD) and ulcerative colitis (UC), was a known problem in industrial-urbanized societies attributed largely to a Westernized lifestyle, wealthy socioeconomic status and other associated environmental factors. However, its incidence and prevalence in low-in-come countries and/or developing countries is steadily rising attributed to the rapid modernization and Westernization of the population. In this, paper the investigators collected the information on the incidence of IBD from the GBD study from 1990-2019 to calculate the



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AAPC and EAPC in ASR of IBD in different regions. The relationship between IBD and the HDI, SDI was analyzed. The Nordpred and BAPC models was also used to predict the prevalence trends of IBD by gender from 2019-2039. Globally, they found North America consistently has the highest IBD ASR, while Oceania consistently has the lowest. Meanwhile, East Asia had the fastest average annual growth in ASR (2.54%), while Central Europe had the fastest decline (1.38%). Countries with low ASIR in 1990 had faster growth in IBD, while there was no significant correlation in 2019. In addition, IBD grew faster in countries with low ASDR in 1990, while the opposite was true in 2019. Analysis of SDI and IBD ASR shows that countries with high SDI generally have higher IBD ASR. Finally, they report projections find a declining trend in the incidence of IBD from 2019-2039, but a gradual increase in the number of cases. There are data from 204 countries. The calculus is illustrated in 7 Figures and 1 Table including data from low-in-come nations herein presented. Fig. 1, A-C summarizes all. They concluded that in the face of global population growth and aging, early monitoring and prevention of IBD is particularly important to reduce the disease burden caused by IBD, especially for countries with a high incidence of IBD. The relationship between IBD and the Human Development Index (HDI) and Socio-Demographic Index (SDI),and predict the prevalence trends of IBD by gender from 2019-2039. This is a great paper supporting clinicians, in their adoption of new epidemiological guidance for IBD by establishing and fortifying key learning approaches maybe expected to change their methods as additional research becomes available. However, the greatest hope and assurance for IBD prevention and management depends largely on broadening, thus far, insufficient understanding of the molecular etiopathogenesis link between multifactorial interplay and chronic inflammation pathways.



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Position: Editorial Board

Academic degree: MD

Professional title: Doctor, Professor

Reviewer's Country/Territory: Turkey

Author's Country/Territory: China

Manuscript submission date: 2023-07-28

Reviewer chosen by: Yu-Lu Chen

Reviewer accepted review: 2023-09-26 08:40

Reviewer performed review: 2023-09-27 19:43

Review time: 1 Day and 11 Hours

Scientific quality	<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
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	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

The projection and burden of IBD ,despite to some limitations as expressed in discussion are well analysed. As a grammar concern, you chose the word "publically" . but "publicly" is considered more correct in grammar sources. Still no revision is recommended.