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## PEER-REVIEW REPORT

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

Manuscript NO: 91837

Title: Are We Ready to Use New Endoscopic Scores for Ulcerative Colitis?

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 04091850

**Position:** Editorial Board

Academic degree: DSc, MD, PhD

Professional title: Chief Doctor, Professor

Reviewer's Country/Territory: Denmark

Author's Country/Territory: Chile

Manuscript submission date: 2024-01-06

Reviewer chosen by: AI Technique

Reviewer accepted review: 2024-01-07 12:15

Reviewer performed review: 2024-01-13 10:28

**Review time:** 5 Days and 22 Hours

	[Y] Grade A: Excellent [] Grade B: Very good [] Grade C:
Scientific quality	Good
	[ ] Grade D: Fair [ ] Grade E: Do not publish
Novelty of this manuscript	[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No novelty
Creativity or innovation of this manuscript	<ul> <li>[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair</li> <li>[ ] Grade D: No creativity or innovation</li> </ul>



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Scientific significance of the conclusion in this manuscript	[ Y] Grade A: Excellent [ ] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No scientific significance
Language quality	[Y] Grade A: Priority publishing [] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[ ] Accept (High priority) [ ] Accept (General priority) [Y] Minor revision [ ] Major revision [ ] Rejection
Re-review	[ ]Yes [Y]No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No

## SPECIFIC COMMENTS TO AUTHORS

The letter comments on studies examining the value of the newly developed Toronto IBD global endoscopic reporting (TIGER) score as an alternative to the traditional Mayo and UCEIS scores. The letter is highly relevant as it points out that more research is still do be done in exploring the correlation between the TIGER score and calprotectin, findings by ultrasound, interobserver agrrements in scoring and definitions of remission and response. I have only two minor comments: It is stated that sigmoidoscopy and colonoscopy both can evaluate the extent and severiry of colonic inflammation. This is not always the case using sigmoidoscopy. Additionally in the choice between sigmoidoscopy and colonoscopy it should be noted that sigmoidoscopy might be preferred by some patients.