

## PEER-REVIEW REPORT

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

**Manuscript NO:** 39953

**Title:** Coeliac disease in the modern era: severity of Small Bowel Mucosal Injury at Diagnosis with Analysis of Clinical Correlates and Rate of Improvement on a Gluten Free Diet

**Reviewer's code:** 00159281

**Reviewer's country:** United Kingdom

**Science editor:** Xue-Jiao Wang

**Date sent for review:** 2018-05-25

**Date reviewed:** 2018-05-31

**Review time:** 6 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	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" 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 checked="" type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

### SPECIFIC COMMENTS TO AUTHORS

In this retrospective study, Cronin O and Dowling D analyse the relationships between coeliac serology, duodenal histopathology, primary presenting symptoms and response



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to gluten free diet in 99 coeliac disease (CD) patients. They found no correlation between symptoms or serology and severity of the small bowel mucosal lesion at CD diagnosis. This an interesting and valuable study that discuss Australian presentation of CD. and I have few comments. I strongly discourage using terminologies like villous atrophy or Oberhuber's subdivision of Marsh III to 3a, 3b and 3c. Villous atrophy is an incorrect and out of date terminology as atrophic organs do not regenerate. I suggest using the term like villous flattening or villous blunting instead. Recent international consensus study has demonstrated no differences between Marsh III a, b and c, indicating that the subdivision of Marsh III has no practical value. I suggest analyzing the data based on Marsh III only and avoid the confusion. Alternatively the authors may compare the Marsh III to 3a, b and c as well and see if there is any difference between them. Please see: Rostami K, Marsh Mn, Johnson MW, et al. ROC-king onwards: intraepithelial lymphocyte counts, distribution & role in coeliac disease mucosal interpretation. GUT 2017 and Marsh Mn, Johnson MW, rostami K. Mucosal histopathology in celiac disease: a rebuttal of Oberhuber's sub-division of Marsh iii. Gastroenterol Hepatol Bed Bench 2015;8:99–109. Results section: Table one need revision and correction of misspellings Over half of the patients (n=51, 52%) were asymptomatic at presentation. Please explain how the asymptomatic cases presented themselves for investigation for CD? It is unclear which 9 (9%) patients had lesser degrees of injury with crypt hyperplasia or only intra-epithelial lymphocytosis? That would bring the total number of patients to 99. Since atypical presentation are dominant, please clarify and discuss the clinical presentation of this group using Microscopic enteritis; Rostami K, aldulaimi D, Holmes g, et al. Microscopic enteritis: Bucharest consensus. World J Gastroenterol 2015;21:2593–604 Please mention how many patients in the whole group had negative serology at diagnosing? This is not clearly reported in results section. Bearing in mind negative serology is very rare and mostly don't have CD: Aziz I, Sanders D et al. Gut. 2017



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Sep;66(9):1563-1572 The authors discuss the literature on follow up biopsy in their discussion. It would be great if they come up with their own suggestion. For instance Does this study suggest that a routine biopsy follow up is lacking a clear prognostic value? (taking in consideration the limitation of the short follow up) Discussion can be shorter and more focused. A good part of discussion is introduction like information and not focused on this study

#### **INITIAL REVIEW OF THE MANUSCRIPT**

##### ***Google Search:***

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

##### ***BPG Search:***

- ☐ The same title
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- ☐ No

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**Manuscript NO:** 39953

**Title:** Coeliac disease in the modern era: severity of Small Bowel Mucosal Injury at Diagnosis with Analysis of Clinical Correlates and Rate of Improvement on a Gluten Free Diet

**Reviewer's code:** 00504545

**Reviewer's country:** Spain

**Science editor:** Xue-Jiao Wang

**Date sent for review:** 2018-05-25

**Date reviewed:** 2018-06-01

**Review time:** 7 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	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input checked="" 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 checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

## SPECIFIC COMMENTS TO AUTHORS

1/. The original findings of this manuscript are to include Australian patients with villous atrophy of different degrees and to make comparisons with the symptoms and



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the response to a GFD 2/ The quality and importance of the manuscript is great. There are no new or unknown findings, but the conclusions summarize clearly the data provided by the authors. 3/ I don't find any limitations on this study

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**Reviewer's code:** 01552044

**Reviewer's country:** Italy

**Science editor:** Xue-Jiao Wang

**Date sent for review:** 2018-05-25

**Date reviewed:** 2018-06-04

**Review time:** 10 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
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			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

## SPECIFIC COMMENTS TO AUTHORS

This is an interesting, well written manuscript which is Worth of publication in the Journal



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