

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Respirology

ESPS manuscript NO: 14709

Title: Collagen Vascular Disease Associated ILD

Reviewer's code: 00742211

Reviewer's country: United States

Science editor: Xiu-Xia Song

Date sent for review: 2014-10-21 17:06

Date reviewed: 2014-11-18 23:40

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input checked="" type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	PubMed Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input checked="" type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		[Y] No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		[Y] No	

COMMENTS TO AUTHORS

This review article by Vigeland and Horton described the clinical presentation, histology and treatment of interstitial lung disease (ILD) in collagen vascular diseases (CVD). In general the manuscript is well written which covers the wide spectrum of ILD caused by CVD. I have the following suggestions for further improvement of the manuscript. 1. Using abbreviation: The authors should use the full terminology and abbreviation in the first description. These include: FVC on page 4; NSIP, OP, UIP and HRCT on page 5; DLCO on page 6; IVIG on page 9; anti-CCP and anti-RF antibodies on page 11; ANCA on page 13; MPO-ANCA and PR3-ANCA on page 14. 2. For each disease, the section heading of "Histology" should be "Histology and CT Findings". 3. It will be more informative if there are descriptions, in terms of the classification and mechanisms of action on some of the newer drugs, such as rituximab. 4. Are there any experimental therapies in the horizon? If there are, adding these as a new section before conclusion will significantly enhance the impact of the manuscript.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Respiriology

ESPS manuscript NO: 14709

Title: Collagen Vascular Disease Associated ILD

Reviewer's code: 00186421

Reviewer's country: Brazil

Science editor: Xiu-Xia Song

Date sent for review: 2014-10-21 17:06

Date reviewed: 2014-11-24 07:55

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	PubMed Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

This is a review about ILD and collagen vascular diseases. It is quite well written, with fluent reading. Minor aspects should be revised prior to its publication in case of acceptance by the World Journal of Respiriology.

1. In the whole manuscript there are many acronyms or abbreviations that are not explained in the first time they appear in the text, such as: NSIP, UIP, OP, FVC, CT, PFT, HRCT, TLC, DLCO, BAL, IPF, MPO-ANCA, PR3-ANCA and Labs. Consider correction.
2. Along the manuscript, the CT scans are not specified as *HRCT* – consider revision because in regular CT scans, interstitial findings are not visible in the required details.
3. When pulmonary hypertension is cited, it must be clear if it is arterial pulmonary hypertension or what?
4. **Abstract:** Radiographs don't show ground-glass infiltrates or interstitial thickening. Consider correction to "imaging studies" or "HRCT".

5. Overview section:

- a. the subtitle should be "Histology and imaging studies (or imaging evaluation)".
- b. the centrilobular findings in HRCT should be discussed because it is an important and confounding differential diagnosis with inflammatory ILD related to CVD with a very distinct treatment. See [Respiration](#) 2009;77(4):389-97. doi: 10.1159/000156958. Centrilobular fibrosis: an underrecognized pattern in systemic sclerosis. [de Souza RB](#), [Borges CT](#), [Capelozzi VL](#), [Parra ER](#), [Iatene FB](#), [Kavakama J](#), [Kairalla RA](#), [Bonfá E](#).

6. Scleroderma section:

- a. treatment –
 - i. Consider adding some comments of the response to treatment according to histological patterns, as in the following sections.
 - ii. references 18 and 24 should also appear after "In two multicenter randomized placebo-controlled trials"
- b. this article should be added because of its importance: [J Rheumatol](#). 2011 Jul;38(7):1326-8. doi: 10.3899/jrheum.101262. Expert agreement on EULAR/EUSTAR recommendations for the management of systemic sclerosis. [Walker KM](#)1, [Pope J](#); [Scleroderma Clinical Trials Consortium](#); [Canadian Scleroderma Research Group](#).

7. Rheumatoid Arthritis section, 2nd paragraph:

- a. a reference in this sentence is missing: "Increased mortality rates in up to two-thirds of patients with existing ILD were reported."

8. ANCA-associated vasculitides section, clinical presentation: GPA was formerly called Wegener's granulomatosis and EGP, Churg-Strauss syndrome.

9. I suggest revision in some phrases:

- a. Introduction, 1st paragraph, 1st sentence. "Collagen vascular diseases (CVD) are a diverse group of autoimmune diseases with a range of systemic manifestations including cardiac (pericarditis), musculoskeletal (myositis, inflammatory arthritis), dermatologic (rashes), ophthalmic (uveitis), and pulmonary (interstitial lung disease, pulmonary hypertension)."
- b. Rheumatoid arthritis, treatment, last sentence. "As noted above, there is concerns regarding initiating or exacerbating ILD with biologic agents and there have yet to be any clinical trials evaluating use of biologic anti-TNF- α agents to treat RA-ILD."

10. Consider remove the references in the table.