



## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Clinical Pediatrics*

**Manuscript NO:** 90755

**Title:** The Gut Microbiota Predicts the Diagnosis of Ulcerative Colitis in Saudi Children

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

**Peer-review model:** Single blind

**Reviewer's code:** 05639365

**Position:** Peer Reviewer

**Academic degree:** PhD

**Professional title:** Associate Chief Physician

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

**Author's Country/Territory:** Saudi Arabia

**Manuscript submission date:** 2023-12-12

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2023-12-14 11:36

**Reviewer performed review:** 2023-12-15 14:01

**Review time:** 1 Day and 2 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 Grade E: Do not publish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>Novelty of this manuscript</b>	<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
<b>Creativity or innovation of this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation



<b>Scientific significance of the conclusion in this manuscript</b>	<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
<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 type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer statements</b>	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

This study reports the predictive power of fecal microbiota, bacteria and bacteriophages, in predicting the diagnosis of ulcerative colitis in children. The article has less content.

1.The discussion section is very weak and no emphasis is given on the discussion of the results like why certain effects are coming in to existence and what could be the possible reason behind them. The discussion should be rather organized around arguments avoiding simply describing details without providing much meaning. 2.Except diagnosis, what about the therapy and prognosis. Does the gut microbiota suggest the use of a potential noninvasive microbiota-based test for the therapy and prognosis of UC in children? 3.Children with a confirmed diagnosis of UC were enrolled in the study. The children were recruited from multiple hospitals in Riyadh, Kingdom of Saudi Arabia (KSA). The inclusion criteria included new-onset and untreated disease, as well as no antibiotic exposure for at least 6 months before stool collection. Fecal samples from the children with UC were collected before bowl preparation. Healthy school children were randomly selected as controls. When did you collect the stool? 4.Results: A high number of significant bacterial and bacteriophage dysbiosis events were found (unpublished



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data).Can you supply the data?