

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Rheumatology

ESPS manuscript NO: 20501

Title: Return to clinical in contrast to serologically-based diagnoses

Reviewer's code: 00503257

Reviewer's country: Japan

Science editor: Shui Qiu

Date sent for review: 2015-06-10 11:08

Date reviewed: 2015-08-28 04:50

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google 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 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 MS describes an important opinion regarding clinical practice on Rheumatology. However, probably due to its rather heavy volume, the impression of its core tip seems to be cloudy. I might think it is nice to reduce the whole volume concisely to easily understanding using some tables and figures. Concise writing focusing on the core tip should be encouraged.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Rheumatology

ESPS manuscript NO: 20501

Title: Return to clinical in contrast to serologically-based diagnoses

Reviewer's code: 02837335

Reviewer's country: Egypt

Science editor: Shui Qiu

Date sent for review: 2015-06-10 11:08

Date reviewed: 2015-08-31 07:07

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google 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 checked="" 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 article deserves to be published but the authors need not underestimate the value of laboratory and adjunctive investigative procedures as is the case in the current manuscript where authors stressed on as being misleading for example their analysis for the sensitivity and specificity of ANA in SLE even if the test had a low sensitivity yet it has a good specificity which makes it a good negative test. Authors better make it clear in their discussion as well as in the title that the intention behind such review is to insist on the importance of clinical examination skills and that labs might be used for screening or to confirm diagnosis as a complementary profile to provide guidance for disease classification. Another important point which is that the treatment of rheumatic diseases in most situations is dependent on both clinical, laboratory as well as adjunctive investigative procedures if feasible, another important point that authors should clarify in their review. The issue behind this review should be to stress on the importance of clinical skills not to underestimate complementary investigative approaches. Authors are advised to minimize the use of general expressions in their descriptives.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Rheumatology

ESPS manuscript NO: 20501

Title: Return to clinical in contrast to serologically-based diagnoses

Reviewer's code: 00505809

Reviewer's country: Morocco

Science editor: Shui Qiu

Date sent for review: 2015-06-10 11:08

Date reviewed: 2015-09-05 04:48

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" 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 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

Interesting point of view, and very challenging exercise. No corrections

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Rheumatology

ESPS manuscript NO: 20501

Title: Return to clinical in contrast to serologically-based diagnoses

Reviewer's code: 00074323

Reviewer's country: Italy

Science editor: Shui Qiu

Date sent for review: 2015-06-10 11:08

Date reviewed: 2015-08-19 17:33

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input 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"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
		BPG Search:	<input type="checkbox"/> Major revision
		<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 nice review presenting a view that many old rheumatologists may agree with. Actually, the title is too strict. Serology remains a fundamental advance in rheumatology, although it has to be guided by clinics. I would prefer something like "return to clinical-driven practice". The author well explain how a "serology-oriented" approach to rheumatology will impoverish the medical abilities and basic skills that remain particularly important considering the increasing availability of powerful, albeit expensive drugs. Unfortunately, economical interests regarding diagnostic assays and reimbursable procedures also risk to divert the attention from the basic care of the patient. It is intriguing that such problems are arising more importantly in developed health systems like US. However, the response to such problems cannot be limited to a "return to the past". I don't believe that the author claims such a return to the past, but some examples and a brief discussion on the how serology and laboratory data can fill gaps in clinical skills should be provided. The discussion about therapeutics is as well interesting. Indeed, some words could be spent to discuss as well the scarcity of basic and clinical studies on the action of combination therapies with "old drugs". In contrast it could be worthwhile to mention as well the increasing availability of small molecules targeting



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specific biological pathways, whose use may require the development of specific skills in the near future.