

## ESPS Peer-review Report

**Name of Journal:** World Journal of Methodology

**ESPS Manuscript NO:** 7607

**Title:** New prospects in the diagnosis and treatment of immune-mediated inner ear disease

**Reviewer code:** 02616129

**Science editor:** Wen, Ling-Ling

**Date sent for review:** 2013-11-26 21:59

**Date reviewed:** 2013-12-09 19:17

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B (Very good)	<input checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input 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"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

## COMMENTS TO AUTHORS

The review article of AIED appears good and deserved to be published in this journal. There are several concerns of review article: 1. The title is "New prospects in the diagnosis and treatment of immune-mediated inner ear disease." As authors mention that "more clinical studies are necessary to evaluate their real value. Intratympanic therapy avoids many of the adverse reactions associated with currently used drugs, but this approach has not been sufficiently evaluated yet. In spite of all the efforts to find a good marker for the disease, the available tests are not specific or sensitive enough to establish a definitive diagnosis." (p13, Conclusion). The question is: so many diagnosis and treatment biomarkers of AIED, but not so specific. Thus, new therapeutic targets and methods are warrant. 2. The authors just published a review paper to deal with biologic agents used for immune-mediated inner ear disease (Lobo D, García-Berrocal JR, Trinidad A, Verdaguer JM, Ramírez-Camacho R. Acta Otorrinolaringol Esp 2013; 64:223-229. appear in ref. 27). Three among five authors are shown in present review article. Why? 3. I would encourage authors to perform real laboratory works instead of review paper of AIED field and eventually find out true diagnostic, prognostic or therapeutic target candidates in the future.

## ESPS Peer-review Report

**Name of Journal:** World Journal of Methodology

**ESPS Manuscript NO:** 7607

**Title:** New prospects in the diagnosis and treatment of immune-mediated inner ear disease

**Reviewer code:** 00506409

**Science editor:** Wen, Ling-Ling

**Date sent for review:** 2013-11-26 21:59

**Date reviewed:** 2014-01-12 18:49

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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 checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<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"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

## COMMENTS TO AUTHORS

In this manuscript the authors review auto-immune inner-ear disease (AIED). The review includes the characteristics of the disease, diagnostic criteria, treatment options and modeling in experimental animal models. It is clear from this review that many aspects are unknown or not described in much detail, which is related to the difficulties to access the location in the ear, i.e. the almost impossibility of taking biopsies; also there are no specific markers such as autoantibodies that specifically point to antigens in the inner ear involved in the elicitation of the autoimmune process. Experimental animal models with clear predictive value are lacking. This is an interesting overview with a number of practical aspects such as the details in treatment options. There are a few comments that could be addressed in revision of the manuscript, and could improve its quality: ? It might be useful to give some insight in the frequency of the disease, i.e. how many patients suffer from AIED? This is in relation to the number of patients that have been described in the literature, and the possibility that many patients might remain undiagnosed. ? With respect to the etiology it is not discussed whether infections, in particular viral infections, could contribute, i.e. by changing molecules from the individual to become self-antigens. The authors only point to a lack of elimination of autoreactive T cells during their maturation in the thymus (page 3): this is only one possibility underlying the emergence of autoimmune disease. The term "autoinflammatory disease" needs clarification in this regard (page 3). ? It is advised to note that the medications used in treatment are not only immunosuppressive (or immunomodulatory) but also anti-inflammatory. Thus, they not only target the auto-immune reaction, but also the inflammation resulting from an auto-immune reaction. In other words, a response in the form of hearing recovery could be also possible in case of a non-auto-immune condition but solely an inflammatory condition. ? It is advised to use the same



## Baishideng Publishing Group Co., Limited

Flat C, 23/F., Lucky Plaza,  
315-321 Lockhart Road,  
Wan Chai, Hong Kong, China

---

order for the various aspects mentioned in the abstract as for the sequence in which they are described in the body, i.e., start with the description of the Rose postulates. ? Regarding the administration of Rituximab, the term “perfusion” is used: this should be “injection”. ? It is advised to add explanatory notes to the legend of Figure 1. ? Regarding Table 1 and Table 2 it is advised to describe whether all factors/components mentioned have to be present, or only some of these. Regarding Table 1 it is advised to present the incidences of various antibodies, if such incidences are available. In Table 2, is “hearing recovery rate >80%” meaning recovery after immunosuppressive treatment? Is the 80% indicating the response in the total population of patients, and if so, how can this be used as marker in an individual patient? Note, that the first line in page 9 mentions 60%.