

## PEER-REVIEW REPORT

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

**Manuscript NO:** 72579

**Title:** Therapeutic drug monitoring in inflammatory bowel disease

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

**Peer-review model:** Single blind

**Reviewer's code:** 05820295

**Position:** Peer Reviewer

**Academic degree:** MBBS

**Professional title:** Doctor, Research Scientist

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

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

**Manuscript submission date:** 2021-10-21

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-10-28 02:27

**Reviewer performed review:** 2021-11-01 06:10

**Review time:** 4 Days and 3 Hours

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<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 checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous

statements

Conflicts-of-Interest: [ ] Yes [Y] No

## SPECIFIC COMMENTS TO AUTHORS

The following "Letter to Editor" entitled "Therapeutic drug monitoring in inflammatory bowel disease" provides a brief overview regarding the importance of TDM in inflammatory bowel disease, comparison between the efficacy of proactive and reactive TDM, current guidelines and available cost effectiveness studies for reactive TDM. The limitations of current practice which are mentioned in the letter include; non inclusion of proactive TDM in the guidelines despite evidence of better efficacy and lack of cost effectiveness studies for proactive TDM. Overall it is a well summarized letter. However I would like to highlight the following points: 1) There appear to be some grammatical errors in the letter such as: "likelihood of clinic response" and "We hold the believe that". Please crosscheck for more grammatical errors. 2) Comments on data regarding utilization and barriers faced for the use of TDM (Especially in developing countries) can be added. Reference: Indian J Gastroenterol. 2020; 39(2): 176–185. doi: 10.1007/s12664-020-01047-6 Overall the above letter is worth considering for publication.

**Response:** Thank you very much for your careful reading of the manuscript, and thank you for your valuable comments for our manuscript. According to your comments, we made a point-to-point response, we hope to be able to meet the requirements for publication, if you are not satisfied with the revised manuscript, we will make a second revision.

1. First, thank you for your careful reading , we apologize for our negligence. We carefully checked the grammar of the manuscript, and made language editing of the manuscript through AJE Company. In cooperation with our institution, the company can

provide AI machine syntax check and automatic language editing functions.

2. Secondly, we gratefully appreciate for your valuable suggestion and read the literature carefully, it is a very valuable document and is quoted in paragraph 5, line 25.

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**Peer-review model:** Single blind

**Reviewer's code:** 04091850

**Position:** Editorial Board

**Academic degree:** DSc, MD, PhD

**Professional title:** Adjunct Professor, Chief Doctor

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

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

**Manuscript submission date:** 2021-10-21

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-11-18 06:49

**Reviewer performed review:** 2021-11-23 06:52

**Review time:** 5 Days

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input checked="" type="checkbox"/> Grade E: Do not publish
<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 type="checkbox"/> Major revision <input checked="" type="checkbox"/> Rejection
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Peer-reviewer</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous

statements

Conflicts-of-Interest: [ ] Yes [Y] No

## SPECIFIC COMMENTS TO AUTHORS

The manuscript represents a letter to the editor referring to the review published by Albader et al (wrongly cited as Farah et al) in World Journal of Gastroenterology regarding therapeutic drug monitoring (TDM) in inflammatory bowel disease. The letter represents more a summary of the conclusions in the review than a personal opinion regarding TDM. It does not question the conclusions in the review in any way and it does not really add new thoughts regarding TDM. Exposure-efficacy relationship for vedolizumab is briefly mentioned. It should have been noted that in case of vedolizumab the case is not as clear as presented here and that there seems to be an upper concentration limit beyond which the efficacy in some reports seem to decrease. There is great interest and debate regarding the use of TDM in IBD and the issue has been the focus for numerous papers, guidelines, letters and editorials. I don't think the present letter adds anything of importance

**Response:** Thank you very much for your careful reading of the manuscript, and thank you for your valuable comments for our manuscript. According to the comments, We carefully read relevant literature and processed the content of the article based on the experience of TDM application in our department. we hope to be able to meet the requirements for publication, if you are not satisfied with the revised manuscript, we will make a second revision.

**Question 1:** The manuscript represents a letter to the editor referring to the review published by Albader et al (wrongly cited as Farah et al) in World Journal of

Gastroenterology regarding therapeutic drug monitoring (TDM) in inflammatory bowel disease.

**Response :**Yes, we gratefully thanks for your careful reading, we have correct 'Farah' to 'Albader' in paragraph 1, line 1.

**Question 2:** It does not question the conclusions in the review in any way and it does not really add new thoughts regarding TDM.

**Response:** Thank you very much for pointing out the problems. We have revised the article. First of all, the conclusions reached in this review are consistent with what we have learned, and we have added our experience of applying TDM in the article. Due to the small number of application cases in our institution, relevant papers have not been completed. We will continue to collect cases and write high-quality articles.

**Question 3:** Exposure-efficacy relationship for vedolizumab is briefly mentioned. It should have been noted that in case of vedolizumab the case is not as clear as presented here and that there seems to be an upper concentration limit beyond which the efficacy in some reports seem to decrease.

**Response:** Yes, we gratefully appreciate for your valuable suggestion and read the literature about TDM application among IBD patients treatment with vedolizumab carefully, and further updates to our article in paragraph 4.

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

**Peer-review model:** Single blind

**Reviewer's code:** 04092118

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Postdoc, Senior Lecturer

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

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

**Manuscript submission date:** 2021-10-21

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-11-18 05:28

**Reviewer performed review:** 2021-11-26 10:05

**Review time:** 8 Days and 4 Hours

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<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
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<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous



statements

Conflicts-of-Interest: [ ] Yes [Y] No

## SPECIFIC COMMENTS TO AUTHORS

In a letter to the editor, the authors discuss the topic of therapeutic drug monitoring in IBD patients with regard to the review by Farah et al. Large part of the letter is theoretical concepts about TDM and not critical appraisal of literature. There is some discussion about the need to individualize thresholds depending on disease characteristics. This could be published as comment. For a letter to the editor more significant content is needed, maybe adding some own experience with TDM. There are minor spelling errors throughout the manuscript. The non-native Speakers of English Editing Certificate is an original paper from Current Opinion in Pharmacology?!

**Response:** Thank you very much for your careful reading of the manuscript, and thank you for your valuable comments for our manuscript. According to the comments, We carefully read relevant literature and processed the content of the article based on the experience of TDM application in our department. we hope to be able to meet the requirements for publication, if you are not satisfied with the revised manuscript, we will make a second revision.

**Question 1:** For a letter to the editor more significant content is needed, maybe adding some own experience with TDM.

**Response:** Yes, we gratefully appreciate for your valuable suggestion, our experience in applying TDM has been added into the revised article. However, due to the small number of patients applying TDM in our institution, the relevant papper has not been completed yet. We will continue to collect cases and write high-quality articles.





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**Question 2:** There are minor spelling errors throughout the manuscript. The non-native Speakers of English Editing Certificate is an original paper from Current Opinion in Pharmacology?!

**Response:** Yes, thank you for your careful reading, we apologize for our uploading error. We carefully checked the grammar of the manuscript, and made language editing of the manuscript through AJE Company. In cooperation with our college, the company can provide AI machine syntax check and automatic language editing functions, but it does not provide editing proof.