



ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 14030

Title: Real-life outcome of anti-TNF α in the ambulatory treatment of ulcerative colitis

Reviewer code: 01568246

Science editor: Yuan Qi

Date sent for review: 2014-09-15 20:44

Date reviewed: 2014-09-25 19:17

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 type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<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	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

The present article deals with an important health problem: How to treat patients with ulcerative colitis? The purpose of the study was to determine to what extent treatment with anti-TNF α agents (infliximab and adalimumab) may lead to clinical remission of ulcerative colitis in patients (in a real-life setting). The results obtained were somewhat disappointing: Real life remission rates were overall low. The aim of the study as well as methods, results and conclusion are clearly presented in the Abstract. The paper reads well. Methods and materials are described in detail and the results show that about one fifth of the 72 patients achieved remission. The discussion is well organized and shows that the present data both support and extend earlier reports. Although the data presented indicated that the real life remission rates of ulcerative colitis after treatment with anti-TNF α were low, the report gives, nevertheless, information that is very useful for further work in the field. The authors should deal with the following questions : (1) Under "Study design and data collection" (page 6) the authors give information about intravenous infusion of IFX and subcutaneous injection of ADA. Were the blood concentrations of the drugs measured and how stable were the blood levels? (2) The authors emphasize that the patients attained steroid-free clinical remission. This means that the patients did not receive steroids following the start of the treatment with anti-TNF α agents. What about other drugs mentioned/presented in Table 1 under "Medications concomitant with IFX (and ADA) therapy at start of therapy"?



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ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

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Title: Real-life outcome of anti-TNF α in the ambulatory treatment of ulcerative colitis

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<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<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	BPG Search:	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> Existing	<input checked="" type="checkbox"/> Minor revision
		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

In this paper, authors retrospectively analyzed anti-tumor necrosis factor alpha therapy (infliximab and/or adalimumab) in patients with ulcerative colitis at the outpatient clinic in a real-life setting of a tertiary referral center and gave the results that only 22.2% patients achieved steroid-free clinical remission, and these patients displayed lower hemoglobin and albumin blood levels at the start of treatment. The authors pointed out it should give patient enough information about anti-tumor necrosis factor alpha therapy for the outcome was rather disappointing. The authors gave their answers about the controversial of anti-tumor necrosis factor alpha therapy in ulcerative colitis patients. I agree to accept this paper with minor reversion.