



## PEER-REVIEW REPORT

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

**Manuscript NO:** 84359

**Title:** Prognostic role of intestinal ultrasound in Crohn's disease

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

**Peer-review model:** Single blind

**Reviewer's code:** 01518946

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Professor, Research Fellow, Senior Consultant Dermatologist

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

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

**Manuscript submission date:** 2023-03-09

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2023-03-10 03:31

**Reviewer performed review:** 2023-03-11 06:41

**Review time:** 1 Day and 3 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 Grade E: Do not publish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 checked="" type="checkbox"/> Grade B: Good <input 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 checked="" type="checkbox"/> Grade A: Priority publishing <input 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 type="checkbox"/> Yes <input checked="" 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 manuscript describes systemic review of intestinal ultrasound and Chron’s disease in terms of the prediction of its prognosis. While this manuscript is short and has a few tables, the content is fruitful and worth for publication. There are no methods including biomarkers to predict its relapse. However, many readers have little impression of intestinal ultrasound. The authors should show raw image data of intestinal ultrasound in patients with Chron’s disease and the evaluation methods concretely. And the authors should discuss how each study evaluates the disease status of Chron’s disease.



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**Reviewer's code:** 00503545

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Director, Doctor

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

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

**Manuscript submission date:** 2023-03-09

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**Reviewer accepted review:** 2023-03-10 04:25

**Reviewer performed review:** 2023-03-19 12:22

**Review time:** 9 Days and 7 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 checked="" type="checkbox"/> Grade B: Good <input 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 type="checkbox"/> Yes <input checked="" 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**

In this review, the authors discuss the role of IUS in Crohn’s disease not only as first line investigation but as extremely useful instrument in predicting response to medical treatment, disease evolution and risk of recurrence before and after surgery. The theme of the paper is clinically interesting, and the paper is well written. However, the authors should address the following points. 1. I suggest that the authors demonstrate typical images or schemas of increased bowel wall thickness (BWT) and vascularization, reduced elasticity and loss of bowel stratification. 2. The authors describe that “Moreover, it is more prevalent in colic CD than in ileal CD and it is associated with lower BWT and lower SWE strain ratio at baseline (see Table 2)” in the text. However, it is not shown in Table2. The authors also describe that “The rate of TR, with more or less extensive definitions, in patients undergoing biological therapy was obtained from 23% to 31% of patients after 12weeks to 2 years of therapy (see Table 2). Is it correct? I suggest that the authors revise Table1 and Table2. 3. It is not shown where Table 1 is inserted in the text. 4. The full spelling of “SWE” is not shown in the text.