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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 15266

Title: Discontinuation of anti-TNF α therapy in inflammatory bowel disease: Is it feasible? When, how and in whom?

Reviewer's code: 00159305

Reviewer's country: Romania

Science editor: Ya-Juan Ma

Date sent for review: 2014-11-19 09:01

Date reviewed: 2014-11-22 00:21

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input checked="" type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	PubMed 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 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"/> No	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		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

To the authors, Congratulations for your interesting work. It certainly is of interest to the readers of WJG and I recommend to be accepted for publication.



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Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 15266

Title: Discontinuation of anti-TNF α therapy in inflammatory bowel disease: Is it feasible? When, how and in whom?

Reviewer's code: 00069142

Reviewer's country: Romania

Science editor: Ya-Juan Ma

Date sent for review: 2014-11-19 09:01

Date reviewed: 2014-11-24 00:48

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	PubMed Search:	<input checked="" 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 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"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		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

Clear, well written and structured in a convincing way for the reader. Good english.



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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 15266

Title: Discontinuation of anti-TNF α therapy in inflammatory bowel disease: Is it feasible? When, how and in whom?

Reviewer's code: 00227388

Reviewer's country: United Kingdom

Science editor: Ya-Juan Ma

Date sent for review: 2014-11-19 09:01

Date reviewed: 2014-11-26 22:27

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	PubMed Search:	<input checked="" 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 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"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		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

I am very happy to support the publication of this review article. The authors have brought out an important topic which is very topical and is urgently needed to guide the busy clinicians on this topic. As authors have pointed out, there are more questions than answers but they have brought out and collated some of the studies that guide the conclusions and recommendations they have made.

Inevitable over the last 20 years the priority has been to define the indications of starting such drugs and how to maintain patients on them. Any studies on how when and in whom to stop these drugs have been a by-product of the studies. Clearly some studies are now ongoing that will guide better and one day there will be concrete recommendations.

I have little to pass on any comments to authors except to congratulate them in bringing this topic to fore and their emphasis on now concentrating on stopping these medications, once started, especially



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if they have been successful in their role.



ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology
ESPS manuscript NO: 15266
Title: Discontinuation of anti-TNFα therapy in inflammatory bowel disease: Is it feasible?
When, how and in whom?
Reviewer's code: 00035826
Reviewer's country: United Kingdom
Science editor: Ya-Juan Ma
Date sent for review: 2014-11-19 09:01
Date reviewed: 2014-12-01 04:21

Table with 4 columns: CLASSIFICATION, LANGUAGE EVALUATION, SCIENTIFIC MISCONDUCT, CONCLUSION. It contains checkboxes for various review criteria like 'Grade A: Excellent', 'Priority publishing', 'PubMed Search', etc.

COMMENTS TO AUTHORS

A useful review and proposal for intermittent use of biologics in Inflammatory Bowel Disease. This is an important area and I feel it should be dealt with in more detail. The proposal and supporting evidence for intermittent treatment is a sensible one, but as always the key question is in which subjects. In particular the differences between UC and CD need drawing out. Establishment of complete mucosal healing and clinical remission is much more straightforward in UC than CD. Regarding CD, patients are very heterogeneous and the consequences of relapse vary widely e.g. should someone with extensive fistulating small bowel disease ever have their biologic stopped. Similarly patients with sphincter compromising perianal disease? Or should there be a requirement for a longer duration of remission in these subjects before stopping? A paragraph on the features which predict poor prognosis disease should be included not only demographic features and smoking but also perhaps imaging characteristics which predict poor prognosis. The summary of the data from clinical trials is useful but should be described at greater length in particular drawing out the different characteristics of the subjects in these trials.