



# Baishideng Publishing Group Co., Limited

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

## ESPS Peer-review Report

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

**ESPS Manuscript NO:** 4560

**Title:** Serum concentrations of insulin-like growth factor-binding protein 5 in Crohn’s disease

**Reviewer code:** 00504351

**Science editor:** Zhai, Huan-Huan

**Date sent for review:** 2013-07-08 14:28

**Date reviewed:** 2013-07-16 13:58

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"/> 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	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

## COMMENTS TO AUTHORS

Comments to authors: In this paper titled “Serum concentrations of insulin-like growth factor-binding protein 5 in Crohn’s disease”, the authors first reported that serum IGFBP-5 reduced in CD patients than those of healthy control people, and also showed the expression of IGFBP-5 in biopsies by immunohistochemical staining. The methods used in this research are suitable and accurate, and the results obtained are sound. But several problems should be revised. Major problem:

1. In figure 2 (A) to 2 (C), there were no any information about these samples, so how can we know the meaning of different intensity of immunostaining for IGFBP-5 in CD patients? Are they come from different patients, or three biopsies come from one patient? The arrows should be added more than one in each image to indicate the positive immunostaining of IGFBP-5. Figure legend should clearly describe what tissues were used and how to judge its intensity of immunostaining. 2. In results. Page 9, last paragraph. This paragraph should consider rewriting. There were no data showing here to get the conclusion as “There were no significant differences between the groups in terms of age, gender, disease activity, disease localization and disease duration.” Minor problems: 3.

In table 3, the authors should label which column is for CD patients with stricture formation or which column is for without stricture formation. The others in manuscript should be corrected: 1)

Page 3, second paragraph, L4, change ...activity index. to “....activity index (CDPI>150)”. 2)

Page 3. In third paragraph, L8, what does it mean “significant moderate correlation”? or “moderate correlation”? Statistic significant correlation means  $P < 0.05$  as the author set 5% level. So if  $P > 0.05$ , there is no significant correlation and also no moderate correlation. Although authors in this study used Cohen’s criteria values to judge the values. It should give some explain here or it will make confused understanding. Please consider rewriting this paragraph. 3) Page 3. In third

paragraph, L11, "The serum IGFBP-5.....staining scores". The meaning of this sentence is not clear. Please consider rewriting this sentence. 4) In page 4, L1,... ..and with white blood cell. , omit the "with" 5) Page 6 to page 7, It is confused to know how many active cases in this study? For example, "four of the 26 patients.....had an active disease." "Nine of the 42 patients were in an active phase of disease...". Does it mean there were 13 cases of active disease? Or four of the active cases were confirmed by endoscopic check and nine of them were confirmed by other examination rather than endoscopic check? What is the difference between active disease and active phase? 6) Page 7, L5, it should give numbers in each group (L1, ?)....(L2, ?)....(L3, ?) as they appeared in table 1. 7) Page 7, second paragraph L4, Endoscopy..... for routine histology. Here is important for description what kinds of biopsies were taken from CD patients with or without stricture formation, or three samples were taken from one patient. What does it mean "for routine histology"? Does it include immunohistochemical staining? Please consider rewriting this sentence. 8) Page 8, L2, sections of tissue. It should clearly give what tissue was used here. 9) Page 8, L4,...hydrogen peroxide block.... It is not clear what concentration of the H<sub>2</sub>O<sub>2</sub> in PBS buffer or in methanol or just used the ready for using kit? 10) Page 8, L11, what is the ratio of second antibody used here? 11) Page 8, last paragraph, L1, change Data management.....to "The SPSS statistical software package (....) was used for data management and analyses". 12) In Result. Page 9, paragraph 1, L3, ...and 79% were..., should be changed to "and 33(78.6) were treated with..." Paragraph 2, L3, ...higher median... change to "higher in median..." Page 10, paragraph 1, L5, "[median 7.2 (5.5-11.3) ng/ml vs. 7.2 (6.3-7.6)..." Where comes the data 7.2 (6.3-7.6)? I can't find it in table 2 or table 3. Same question also



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**Title:** Serum concentrations of insulin-like growth factor-binding protein 5 in Crohn' s disease

**Reviewer code:** 02445717

**Science editor:** Zhai, Huan-Huan

**Date sent for review:** 2013-07-08 14:28

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CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input checked="" type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input checked="" type="checkbox"/> Accept
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<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
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		<input type="checkbox"/> No records	

### COMMENTS TO AUTHORS

This is a good original research article that demonstrates that Crohn's disease patients had lower serum levels of IGFBP-5 compared to healthy controls. It is a well thought out and well performed study. However, the results could be considered as preliminary because no explain the why of these findings. Thus, as say the authors is need additional study to explain the low circulating levels of IGFBP-5 in Crohn's disease patients and answer the question if it is involved in stenosis formation of CD.