**Name of journal:** World Journal of Gastroenterology  
**Manuscript NO:** 92900  
**Title:** Diagnostic delay in inflammatory bowel diseases in a German population  
**Provenance and peer review:** Unsolicited Manuscript; Externally peer reviewed  
**Peer-review model:** Single blind  
**Reviewer’s code:** 05194957  
**Position:** Editorial Board  
**Academic degree:** Doctor, PhD  
**Professional title:** Chief Doctor, Doctor, Professor  
**Reviewer’s Country/Territory:** China  
**Author’s Country/Territory:** Germany  
**Manuscript submission date:** 2024-02-10  
**Reviewer chosen by:** AI Technique  
**Reviewer accepted review:** 2024-03-07 23:39  
**Reviewer performed review:** 2024-03-16 14:34  
**Review time:** 8 Days and 14 Hours

<table>
<thead>
<tr>
<th>Scientific quality</th>
<th>Grade A: Excellent</th>
<th>Grade B: Very good</th>
<th>Grade C: Good</th>
<th>Grade D: Fair</th>
<th>Grade E: Do not publish</th>
</tr>
</thead>
<tbody>
<tr>
<td>Novelty of this manuscript</td>
<td>Grade A: Excellent</td>
<td>Grade B: Good</td>
<td>Grade C: Fair</td>
<td>Grade D: No novelty</td>
<td></td>
</tr>
<tr>
<td>Creativity or innovation of this manuscript</td>
<td>Grade A: Excellent</td>
<td>Grade B: Good</td>
<td>Grade C: Fair</td>
<td>Grade D: No creativity or innovation</td>
<td></td>
</tr>
</tbody>
</table>
### SPECIFIC COMMENTS TO AUTHORS

The incidence of inflammatory bowel disease is increasing year by year, and the problem of delayed diagnosis of IBD is a prominent problem regardless of geography. This study is a 10-year retrospective study of delayed diagnosis in German IBD patients, and found some risk factors for delayed diagnosis, which are related to both "Patient waiting time" and "Physician time to diagnosis". Relative risk factors for Crohn's disease and ulcerative colitis are also different. Although due to regional differences, ethnic differences, differences in medical systems, and differences in doctors' perception of diagnostic criteria in different regions, this study is still a guide and reference for gastroenterologists around the world. It is recommended that this article be published, which will provide guidance and reference for doctors in different medical systems in the timely diagnosis of inflammatory bowel disease.

Comments 1. Lack of clarity on the presentation of results and conclusions, such as what are the risk factors for delayed diagnosis? What are the protective factors that reduce waiting time? The expressions in the abstract, results, and discussions are inconsistent, and it is easy to misunderstand.

2. Some of the results are puzzling, such as why there is a difference between CD and UC.
"Physician time to diagnosis" when they are doctors who have the same knowledge of IBD. Why does "a positive family history for UC" delay a doctor's diagnosis? It is better to have a discussion and a reasonable explanation. 3. The conclusions in the abstract do not cover the main outcomes of the article, and only patients with CD are mentioned, but not UC patients.
Name of journal: *World Journal of Gastroenterology*

**Manuscript NO:** 92900

**Title:** Diagnostic delay in inflammatory bowel diseases in a German population

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

**Peer-review model:** Single blind

**Reviewer’s code:** 03508690

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

**Reviewer’s Country/Territory:** China

**Author’s Country/Territory:** Germany

**Manuscript submission date:** 2024-02-10

**Reviewer chosen by:** Ming Fan

**Reviewer accepted review:** 2024-04-11 14:08

**Reviewer performed review:** 2024-04-11 14:26

**Review time:** 1 Hour

<table>
<thead>
<tr>
<th>Scientific quality</th>
<th>Grade A: Excellent</th>
<th>Grade B: Very good</th>
<th>Grade C: Good</th>
<th>Grade D: Fair</th>
<th>Grade E: Do not publish</th>
</tr>
</thead>
<tbody>
<tr>
<td>Novelty of this manuscript</td>
<td>Grade A: Excellent</td>
<td>Grade B: Good</td>
<td>Grade C: Fair</td>
<td>Grade D: No novelty</td>
<td></td>
</tr>
<tr>
<td>Creativity or innovation of this manuscript</td>
<td>Grade A: Excellent</td>
<td>Grade B: Good</td>
<td>Grade C: Fair</td>
<td>Grade D: No creativity or innovation</td>
<td></td>
</tr>
<tr>
<td>Scientific significance of the conclusion in this manuscript</td>
<td>[ ] Grade A: Excellent  [ Y] Grade B: Good  [ ] Grade C: Fair  [ ] Grade D: No scientific significance</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>-------------------------------------------------------------</td>
<td>--------------------------------------------------------------------------------------------------</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Language quality</td>
<td>[ ] Grade A: Priority publishing  [ Y] Grade B: Minor language polishing  [ ] Grade C: A great deal of language polishing  [ ] Grade D: Rejection</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Conclusion</td>
<td>[ ] Accept (High priority)  [ Y] Accept (General priority)  [ ] Minor revision  [ ] Major revision  [ ] Rejection</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Re-review</td>
<td>[ ] Yes  [ Y] No</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Peer-reviewer statements</td>
<td>Peer-Review: [ Y] Anonymous  [ ] Onymous</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Conflicts-of-Interest: [ ] Yes  [ Y] No</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**SPECIFIC COMMENTS TO AUTHORS**

The authors investigated an interesting topic and pointed out the crucial role of doctors in it. Relevant research can help medical institutions propose a series of improvement measures for early detection of related diseases.