

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Rheumatology

ESPS manuscript NO: 13041

Title: Safety of biologic therapies during pregnancy in women with rheumatic disease

Reviewer's code: 00698952

Reviewer's country: China

Science editor: Xue-Mei Gong

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	PubMed Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" 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"/> Plagiarism	<input checked="" 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

The authors have reviewed the literature up to the latest ones on the outcomes of those pregnancies exposed to biologics for treatment of autoimmunity. While most of the studies in the literature report the pregnancy outcomes of unintentional, and therefore short-term exposure, only a few report the outcomes of intentional, continuous exposure, presumably due to severity of the disease that required treatment throughout the pregnancy. As these studies were commonly confounded with multiple factors, the authors found no convincing evidence that the biologics for autoimmune treatment are safe for the fetuses. They rather err on the side of caution to advocate that the present guidelines on avoiding treatment of pregnant women having ongoing autoimmune disease with biologics should not be relaxed. The review is overall a sensible piece of article with useful information, references and analyses. The only criticism is the presence of some careless mistakes of English in the article. Here are the problematic sentences, especially the part in parentheses: Page 4, 1st paragraph; the part in parentheses is hard to follow: Although (there is considerable evidence for rheumatic diseases and pregnancy), little information is available about the safety of biologic drugs in pregnancy in humans. Page 6, last paragraph; the pregnant women should be specified as



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anti-TNF-exposed: however, the rates of preterm/premature births (19.9% in (pregnant women) vs. 12.3% in the general population) and low birth weight/small for gestational age (6.1% in (pregnant women) vs. 8.2% in the general population) were not as expected for the general U.S. population. Page 9, first paragraph; mistyping: On the other hand, ETN is also different to IFX and ADA because it has the lowest affinity (of the etanercept) to neonatal IgG transporter