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ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 13801

Title: Cardiopulmonary toxicity related to mesalazine therapy. A case report and literature review.

Reviewer code: 00068316

Science editor: Ya-Juan Ma

Date sent for review: 2014-09-03 08:48

Date reviewed: 2014-10-13 14:47

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 checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<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"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	BPG Search:	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

The manuscript mainly reports a case of pulmonary and cardiac toxicity related to mesalazine. This is a well-written paper containing interesting results which merit publication. For the benefit of the reader, however, a number of points need clarifying and certain statements require further justification. There are given below. 1. Language still need to be polished. Some errors exist between lines. 2. In the first sentence, 5-ASA didn't mean mesalamine. 3. It will be better that the authors ranked all the possible ADRs related to the use of mesalamine according to levels of mild, moderate and severe.



ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 13801

Title: Cardiopulmonary toxicity related to mesalazine therapy. A case report and literature review.

Reviewer code: 00503587

Science editor: Ya-Juan Ma

Date sent for review: 2014-09-03 08:48

Date reviewed: 2014-10-03 06:04

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 checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<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"/> 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"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

This report involves the illustration of a single patient with cardio-respiratory complications in the context of UC and drug exposures. Specific Comments: 1. There are errors of english language use/structure that need to be corrected (through almost every section of the manuscript) 2. The authors refer to a severe paericardial effusion. The word severe should be chnaged to a more appropriate word. The effusion was large, but no assoicated with any haemodynamic compromise 3. A further differential to add (first paragraph of Discussion) is cardio-respiratory involvement as an extra-intestinal manifestation of UC. I note that the symptoms resolved with corticosteroid therapy, which coincided with cessation of mesalazine 4. Mesalazine is not the only form of 5-ASA drug. Please revise the first part of the abstract and the Introduction to make this more clear. 5. Table 1 is very helpful, but quite busy. Could it be simplified at all? Is there a similar illustration of cardiac complications of 5-ASA drugs?

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 13801

Title: Cardiopulmonary toxicity related to mesalazine therapy. A case report and literature review.

Reviewer code: 00036825

Science editor: Ya-Juan Ma

Date sent for review: 2014-09-03 08:48

Date reviewed: 2014-10-16 16:26

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" 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"/> Existing	<input checked="" 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"/> 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"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

The paper merits publication, but several questions necessitate clarification. In the title first: "toxicity" or hypersensitivity are the mechanisms on the basis of eosinophilic pneumonia and pericardial effusion in the patient discussed. A latent, late type hypersensitive mechanism seems being probable. It was mentioned in the clinical history that the mesalazine therapy was stopped and prednisone was initiated. The time interval between the removal of mesalazine and the initiation of prednisone is not done. The time interval is an important data to argue the remission if it was related to the withdrawal of mesalazine or to the introduction of steroid. The answer may help to clear up the underlying pathogenetic mechanism. Over mesalazine azathioprine was an important part of the medical treatment. In the paper there is no any data about the continuation or the withdrawal of aza. In the discussion it is required to discuss the potential role of this drug in the development of clinical complications. In the clinical description the cardiac symptoms are lacking while the amount of pericardial fluid (33,6 mm length) is important. It should produce failure in the cardiac function, in the pumping mechanism (ejection) and induce tachycardia, dyspnoea, peripheral oedema, etc. Unfortunately echocardiography was not done.



ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 13801

Title: Cardiopulmonary toxicity related to mesalazine therapy. A case report and literature review.

Reviewer code: 00041957

Science editor: Ya-Juan Ma

Date sent for review: 2014-09-03 08:48

Date reviewed: 2014-10-17 22:57

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
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<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"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

The Authors referred on a patient with ulcerative colitis who presented fever, dyspnea and chest pain due to severe pericardial effusion and interstitial pneumonia. The symptoms and the radiological abnormalities disappeared after mesalazine suspension. The Authors are to congratulate for the brilliant conduct of the diagnostic and therapeutic strategy. This contribute and the accurate revision of similar cases published in the literature are an important contribute for appropriately following ulcerative colitis patients. Probably the knowledge of this syndrome can help the medical treatment of IBD patients.



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ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 13801

Title: Cardiopulmonary toxicity related to mesalazine therapy. A case report and literature review.

Reviewer code: 00034127

Science editor: Ya-Juan Ma

Date sent for review: 2014-09-03 08:48

Date reviewed: 2014-10-14 18:38

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<input checked="" 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"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

This is a very well written case report with literature review on mesalazine-induced cardiopulmonary toxicity.