

Review Form 1.6

Journal Name:	Asian Journal of Research and Reports in Gastroenterology
Manuscript Number:	Ms_AJRRGA_86926
Title of the Manuscript:	Evaluation of the relationship between fecal / serum levels of Infliximab and clinical response to treatment of IBD patients: a cross-sectional study
Type of the Article	Original Research Article

General guideline for Peer Review process:

This journal's peer review policy states that **NO** manuscript should be rejected only on the basis of '**lack of Novelty**', provided the manuscript is scientifically robust and technically sound. To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

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PART 1: Review Comments

	Reviewer's comment	Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
Compulsory REVISION comments	<p>The authors report the results of a prospective cross-sectional study of the measurement of fecal infliximab and the levels of inflammatory markers as well as serum IFX in 28 IBD patients under standard infliximab treatment. They conclude, that late measurement of fecal IFX is not a good predictive marker to evaluate the clinical response to IFX treatment.</p> <p>Abstract: Why was the IFX trough level not obtained at day 14 and why were clinical scores not obtained again at week 14 (abstract)?</p> <p>Method: Was informed consent obtained from the participants? Have the trough levels of serum IFX on day fourteen been obtained? If not, have your ethics committee and the patients understood that those who should receive a higher IFX dose because of a low IFX serum level at day fourteen would only be detected at week 14th? Were all participants under IFX monotherapy? How many had had previous intestinal surgical interventions? Why do the authors not report the disease localizations according to the Paris classification? Do they think, that disease location and extension have impact on fecal IFX levels?</p> <p>The protocols for the stool sample collection and the protocols used to determine serum and fecal IFX levels should be described.</p> <p>How has the sample size of participants been calculated?</p> <p>Results: Table 1: The CDAI and partial MAYO scores are indicated for 14 day and 14 weeks of IFX treatment, but not at study entry: why? The same is true for serum albumin. Te measurement units should be indicated with all laboratory results. The number of patients whose results are shown should be indicated.</p> <p>Table 2: the measurement units should be reported for every result. NO reponse rather than NOT response.</p> <p>Discussion: A test of IFX serum levels on day 14th is mentioned in the discussion, but the results of these IFX levels are not shown.</p> <p>Even though fecal IFX and serum CRP levels 14 days after the first IFX infusion can predict the clinical response to the therapy the authors conclude, that fecal IFX at week fourteen is not a useful marker. The reason is the lack of significant decrease of fecal IFX between week 2 and 14. Could this contradiction be due to the small number of study participants?</p> <p>The penultimate paragraph of the discussion: "Since we don't have a fecal infliximab level on first days of treatment, we may suggest that measuring this factor could help us better understand this correlation". Should this be ... on day 14?</p> <p>The study on fecal IFX, published in 2015, was done with UC patients. Could a study with Crohn's disease patients alone provide more clarity?</p>	
Minor REVISION comments		
Optional/General comments		

PART 2:

	Reviewer's comment	Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
Are there ethical issues in this manuscript?	<i>(If yes, Kindly please write down the ethical issues here in details)</i>	

Reviewer Details:

Name:	Denise Herzog
Department, University & Country	Cantons Hospital of Fribourg, Switzerland