



SDI Review Form 1.6

Journal Name:	International Blood Research & Reviews
Manuscript Number:	Ms_IBRR_22595
Title of the Manuscript:	Association Of Butterfly Rash & ANA Positivity With IBD.
Type of the Article	Case Report

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:

(<http://www.sciencedomain.org/page.php?id=sdi-general-editorial-policy#Peer-Review-Guideline>)



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PART 1: Review Comments

	Reviewer's comment	Author's comment <i>(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)</i>
<u>Compulsory</u> REVISION comments	In this case report, the authors present a case of a 30 year-old female patient with multiple autoimmune and inflammatory manifestations, both clinical and with concordant para-clinical test results, overlapping SLE and IBD. The aim of this case report, as stated by the title, is that of raising awareness on the possibility of identifying features typically seen in SLE in other autoinflammatory diseases, such as IBD. Although common knowledge, the educative purpose of such a case report is not to be dismissed, as many patients with autoinflammatory diseases may present overlapping syndromes, at least at some point during their evolution. Nevertheless, I don't believe the apparent objective of the case report has been met. It only lists clinical signs and different tests results, with no interpretation, and it directly concludes in the fact that the diagnosis is difficult. A thorough interpretation of most results is lacking. The patient was not studied completely and the diagnostic process is not only not finalized, but also not at all explained or justified in the report. Results such as "features of Inflammatory bowel disease" are not enough to justify a diagnosis without proper description. The treatment choice is not justified either, although maybe this part is the least relevant, since this case report seems more oriented toward	- Corrections in case report & discussion is done. Thank you sir/madam. It helped me to improve expression of data in better way. Thank you for your guidance.



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	the diagnostic process. The overall reading experience is uncomfortable, with typography and grammar errors, a style that is too informal, some non-standard, incomplete or incorrect measurement units, unexplained abbreviations and inconsistent formatting. Please see a few examples just for the abstract below. The general feeling is that the entire case report part was copied directly from the patient's clinical notes, without any change. See lines 51-89, with a special emphasis on lines 87-89, which don't bring any information, but are always seen in one form or another in patients' notes. The discussion is completely missing, with just a paragraph of cited general information and no reference whatsoever to the actual case that was presented. Some images in the figures seem distorted horizontally and should be corrected (1C, 2A, 2B...)	
Minor REVISION comments		
Optional/General comments		