Reviewer's report

Title: Evaluation of gastrointestinal symptoms in different patient groups using the visual analogue scale for irritable bowel syndrome (VAS-IBS)

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Reviewer: Gabrio Bassotti

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The authors evaluated GI symptoms in different pathologic groups by means of a VAS scale they proposed and validated, to see whether it is possible to discriminate between groups on a symptom basis. My comments are detailed below.

MAJOR COMPULSORY REVISIONS

1. Introduction. I do not feel that it is difficult to distinguish, even on clinical grounds, between IBS, ED, and CIPO. The last condition, in particular, displays such peculiar features that it is often seen by surgeons...besides, what is the difference between ED and CIPO? Please specify here.

2. Materials and Methods. Controls. Using medical staff samples as controls might not be a good idea, in that these are subjects biased toward a greater attention toward medical details. I suggest the authors use a more appropriate control group (e.g., random sample from general population).

3. Materials and Methods. Patients with dysmotility disorders. Recruitment of these patients seems to have been done retrospectively, since subjects were included undergoing laparoscopy in the last 10 years. Again, the difference between ED and CIPO as presented here by the authors is not convincing.

4. Materials and Methods. As a further group, the authors chose patients with pSS. Again, I wonder whether these subjects are appropriate. To test their hypothesis, the authors should compare IBS patients with more appropriate patients groups, such as fibromyalgia patients, celiac disease patients, and patients with food allergy/intolerance.

5. Again, concerning recruitment, it appears that the authors were aware “a priori” of the patients’ diagnoses, introducing a further bias. A more appropriate way of conducting such a study would have been to administer the scale in a prospective manner, during an established period of time, to all patients evaluated for suspected functional GI disorders.

6. The scale was not administered in the same manner to all subjects participating to the study.

7. Results. It is not surprising that pSS patients had less GI complaints that GI disorders; things could probably be different if scleroderma patients were selected, in whom GI involvement is often present and important.

8. The conclusions are misleading; on these basis the VAS score seems of no
utility in this setting.

**Level of interest:** An article of limited interest

**Quality of written English:** Acceptable

**Statistical review:** No, the manuscript does not need to be seen by a statistician.

**Declaration of competing interests:**

I declare that I have no competing interests