Reviewer's report

Title: Value of fecal calprotectin in the evaluation of patients with abdominal discomfort: an observational study

Version: 2 Date: 28 September 2011

Reviewer: Yinghong Wang

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COMMENTS FOR THE AUTHOR:

This is an observational prospective study of the diagnostic value of fecal calprotectin based on the analysis of association between fecal calprotectin and upper or lower endoscopy findings. It is a large series of 575 patients enrolled. The data show that higher fecal calprotectin values before the endoscopy could reliably predict the significant organic abnormalities in the GI tract. The predictive value is less well in the upper GI tract than in the colon.

1. Authors mentioned 136 patients had both EGD and colonoscopy, among them, 106 patients had negative initial endoscopy evaluation. What was the indication for repeat evaluation in 53 patients? What was the initial calprotectin level of these specific group of 106 patients?

2. Was there a change in the calprotectin level between the initial and follow up endoscopy? What is the time gap between the two endoscopy evaluations?

3. Can the authors speculate what will be an appropriate evaluation option, EGD vs colonoscopy or both for a patient with abdominal discomfort based on an elevated fecal calprotectin level?

4. Is there any data on the level of fecal calprotectin post treatment for these significant GI diseases e.g. esophagitis, gastritis, ulcers, etc in the follow up? Can fecal calprotectin level be used to monitor the disease activity in the non-IBD patients?

Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Acceptable

Statistical review: Yes, but I do not feel adequately qualified to assess the statistics.