Reviewer's report

Title: Long-term efficacy of infliximab for refractory ulcerative colitis: Results from a single center experience

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Reviewer: Gionata Fiorino

Reviewer's report:

The Authors reported the results from a retrospective cohort of patients treated with infliximab for refractory ulcerative colitis, followed up on the long-term. They found that about half of subjects required dose intensification with a very high colectomy-free rate on the long-term. They also tried to investigate possible predictors for long-term remission after dose intensification.

The topic is of high interest, since data on the efficacy of dose intensification of infliximab over 12 months are not available. The manuscript is well written, but can be improved in terms of clarity. Some issues should be addressed to the Authors to make the manuscript suitable for publication.

1) The Authors evaluated different endpoints in their cohort. While the primary endpoint is clear, the secondary endpoints declared in the "Assessment" section are not all consistent with the reported results. I suggest the Authors to detail all the endpoints in the Results section, following the same outline they used in the list of endpoints cited in the "Assessment" section.

2) The timeline of the study is quite hard to understand. There are different endpoints reported for different follow-up time. In particular, the time to colectomy is not clear in the Results section (it seems 63 months on average), as well as the other endpoint time-to-observation. Please consider to calculate all the endpoints at a definite timepoint (i.e. 3 or 5 years). Otherwise, specify the time of observation for all the endpoints throughout the manuscript.

3) I suggest to discuss the results considering also the data from Cesarini et al. 2013, which investigated a similar cohort of patients with similar endpoints on the short-term.

4) The discussion on the role of previous CMV infection should be improved. In the Results section, details on how previous CMV positivity could affect the therapy with infliximab are not provided. I suggest to add a brief section on this aspect, also explaining how the Authors differentiated a CMV-related colitis from a non significant CMV-overinfection.

5) The references need to be edited as required by the Journal guidelines.

6) Figure (1): There is a mispelling on Tacrolimus. Please correct.

Level of interest: An article of importance in its field
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.