Reviewer's report

Title: Colonic Tuberculosis mimicking Crohn's disease; Report of a case

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Reviewer: Prof S.P. Misra

Level of interest: A paper of limited interest

Advice on publication: Accept after discretionary revisions

1. The authors report a patient with colonic tuberculosis (a rare disease in the West) who was wrongly diagnosed as having Crohn's disease (a relatively common occurrence in the West).

The case in discussion is important because more and more patients having abdominal tuberculosis are being reported from the developed countries and the case highlights the importance of considering colonic tuberculosis as a differential diagnosis.

The main problem with the paper is the language and I strongly suggest that the authors take help of an English-speaking editor.

Compulsory Revisions:
The conclusion is not relevant. TB should be however, considered as a differential diagnosis in patients suspected of having a tumourous lesion on colonoscopy and in patients suspected of having Crohn's disease. (see J Gastroenterol Hepatol 1999; 14: 723-9).
Background: anti-tuberculous rather than tuberculostatic

Case report: but stopped drinking five years ago. He did not smoke and worked as-----

E. histolytica (in italics) rather than amoebiasis

epithelioid and not epitheliod

g/d rather than gr/d

Bronchoscopy

Please mention the duration of follow-up.

References are not in the Vancouver style.

**Competing interests:**

None declared.