Reviewer's report

Title: Therapeutic preferences and outcomes in newly diagnosed patients with Crohn's disease in the biological era in Hungary. A nationwide study based on the National Health Insurance Fund database

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Reviewer: Julajak Limsrivilai

Reviewer's report:

The authors showed a nationwide trend of IBD treatment in Hungary in which immunomodulators and biologics have been increasingly used after 2009. The results also showed that the rate of hospitalization, but not surgery, decreased with more biologics and immunomodulators use. This finding supports the importance of early use of biologics and immunomodulators. Please find my comments below.

1. The authors stated that early introduction of immunomodulators and biologics may be associated with improved outcomes such as lower risk of surgery and hospitalization in previous studies, therefore the aim of this study was to investigate how these changing paradigms affect clinical outcomes. In this study, the authors categorized the patients according to the maximum treatment received at 3 years after the initial diagnosis. What is the logic behind categorizing the patients at 3 years period? Could the authors have tried to categorize the patients at a different time point, such as 1 year, which would probably better reflects the effect of early introduction of biologics/immunomodulators?

2. In this observational study, the authors said that maximal treatment steps can be regarded as proxy severity markers in patients with IBD. However, to investigate the effect of biologics treatment, I would suggest doing more analyses by comparing the outcomes between patients with the same disease severity who did and did not receive biologics by matching the patients using propensity score. Factors possibly associated with disease severity such as age, gender, hemoglobin level and complicated disease behaviors e.g. stricture/fistula/perianal or upper tract involvement should also be integrated into the propensity score. Another way to highlight the effect of biologics on the outcomes is to use Cox proportional hazards regression adjusted for factors that might be related to the disease severity.
Are the methods appropriate and well described?
If not, please specify what is required in your comments to the authors.

No

Does the work include the necessary controls?
If not, please specify which controls are required in your comments to the authors.

Yes

Are the conclusions drawn adequately supported by the data shown?
If not, please explain in your comments to the authors.

No

Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?
If an additional statistical review is recommended, please specify what aspects require further assessment in your comments to the editors.

I am able to assess the statistics

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