

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 33702

**Title:** Predictors of esophageal varices and first variceal bleeding in liver cirrhosis patients

**Reviewer's code:** 03011757

**Reviewer's country:** Australia

**Science editor:** Yuan Qi

**Date sent for review:** 2017-02-28

**Date reviewed:** 2017-03-08

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

### COMMENTS TO AUTHORS

Review on the manuscript "Predictors of esophageal varices and first variceal bleeding in liver cirrhosis patients" The manuscript of Kraja et al. reports a prospective study addressing the measurement of non-invasive parameters (e.g. MELD, FIB-4, FI, APRI) as predictors of esophageal varices and esophageal bleeding. The authors conclude that FIB-4 is the most efficient non-invasive liver fibrosis marker, which can be used for initial screening. However, none of the markers was able to predict esophageal bleeding. The manuscript is very well written. Although several studies that do report a low sensitivity of non-invasive markers for the prediction of esophageal bleeding can be found in the literature, the strength of this study lies in the prospective study design. Nevertheless, there are several points missing in the manuscript: 1. The authors state that this study is planned prospectively. However, the inclusion criteria for the participants are not clear to me: what grade of cirrhosis was necessary for inclusion? Please comment in the method section. 2. The number of control patients seems to be



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very low. Was the number of control patients calculated while planning the prospective study design? 3. It would have been interesting to report a second time point for the measurement of the non-invasive parameters - this might have increased the sensitivity and specificity!? Were the non-invasive parameters only measured once? 4. How did you monitor the compliance of patients who were subjected to medical treatment of the esophageal varices?

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 33702

**Title:** Predictors of esophageal varices and first variceal bleeding in liver cirrhosis patients

**Reviewer's code:** 02942437

**Reviewer's country:** Japan

**Science editor:** Yuan Qi

**Date sent for review:** 2017-02-28

**Date reviewed:** 2017-03-09

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

### COMMENTS TO AUTHORS

The paper by Kraja Bledar et al. demonstrated FIB-4 was strong predictor of EV in patients with liver cirrhosis; however, there was no association between FIB-4 and EVB. They concluded that FIB-4 is useful for initial screening tool for cirrhotic patients in the areas with lack of endoscopy facilities. Minor revision 1.Red sing of EV is a crucial sign predicting EVB; however, there is no description about red sing. The author should describe the number of EV with red sing in Table 4. 2.Table 4 indicated that 4 (11.8%) patients experienced EVB in None EV. Did these patients experience bleeding from EV? This description confuses the readers. 3.The authors should describe whether antiplatelet and anticoagulant agents were administrated in these patients.

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 33702

**Title:** Predictors of esophageal varices and first variceal bleeding in liver cirrhosis patients

**Reviewer's code:** 00503443

**Reviewer's country:** Italy

**Science editor:** Yuan Qi

**Date sent for review:** 2017-02-28

**Date reviewed:** 2017-03-16

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
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		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

### COMMENTS TO AUTHORS

The work entitled: "Predictors of esophageal varices and first variceal ....", by Bledar Kraja et al. aims to assess "predictors" of esophageal varices and variceal bleeding using various non-invasive markers in Albanian patients with newly diagnosed liver cirrhosis. The authors conclude that only Fib-4 is reliable as a predictor of esophageal varices, while none of the other non-invasive marker that have been assessed is reliable in predicting variceal bleeding. Although the topic is not new, the work is well conceived, worth of consideration, above all because is coming from a country with limited resources in the attempt to avoid a number of upper endoscopy. However, in its present form, the paper is not suitable for publication and a number of clarifications are needed. Material and Methods section Page 6, lines 13-14: "newly diagnosed ..... hospitalized at the.... 2005-2017". What does "newly" mean exactly? For the first time? Does it mean that 33 patients in Child C class have diagnosis of liver cirrhosis for the first time? Or they were admitted newly in this hospital? Why 43 patients in Child class A were



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hospitalized? Perhaps as outpatients? Follow up period of the patients that have been recruited in 2017 could not be long enough to allow their inclusion, and in my opinion such data must be eliminated. Page 6 line 24: Why were patients with current or past history of treatment for chronic B or chronic C hepatitis excluded? Discussion section Page 12 lines 7-9: "Our study demonstrate sufficient ..... ranged from 0.45 to 0.55". These statements are in contrast to what is said just after, i.e, that none of the non-invasive marker is useful ..." and therefore must be re-written or eliminated. Page 12, lines 11-15: This sentence is inappropriate, because this study demonstrates that none of the non-invasive markers of fibrosis that were assessed is useful for predicting EVB. Yet, lines 23-25: "In our study, the .... in cirrhotic patients". This is not true, at least for first variceal bleeding.