

PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

Manuscript NO: 35238

Title: New 14-mm diameter Niti-S biliary uncovered metal stent for unresectable distal biliary malignant obstruction

Reviewer's code: 02549032

Reviewer's country: Greece

Science editor: Fang-Fang Ji

Date sent for review: 2017-07-06

Date reviewed: 2017-07-11

| 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 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 checked="" type="checkbox"/> Grade D: Fair | <input type="checkbox"/> Grade D: Rejected | <input type="checkbox"/> Plagiarism | <input type="checkbox"/> Minor revision |
| <input type="checkbox"/> Grade E: Poor | | [Y] No | <input type="checkbox"/> Major revision |
| | | BPG Search: | |
| | | <input type="checkbox"/> The same title | |
| | | <input type="checkbox"/> Duplicate publication | |
| | | <input type="checkbox"/> Plagiarism | |
| | | [Y] No | |

COMMENTS TO AUTHORS

This is a retrospective study on palliative treatment of unresectable distal biliary malignant obstruction using uncovered self-expandable metal stent with a large diameter of 14mm (Niti-S 14). The authors concluded that larger diameter Niti-S 14 stent had low rate of recurrent biliary obstruction. There are some major issues: 1. The issue of palliative treatment of distal malignant biliary obstruction is not new. Many different type of stents have been used with more or less equal efficacy. The superiority of one drainage policy over other is too difficult to be proved by pure scientific evidence. There is no standard accepted policy instead individualized strategies based on the availability of stents, cost and education to every center. 2. It is not clear to which was used as standard in this study? Studies on stent placement are controversial, operator dependent and confusing based on different types of stents. 3. Larger diameter stents up to 14cm as in this study might be a problem of biliary rupture in cases of tight structures. No



**Baishideng
Publishing
Group**

7901 Stoneridge Drive, Suite 501,
Pleasanton, CA 94588, USA
Telephone: +1-925-223-8242
Fax: +1-925-223-8243
E-mail: bpgoffice@wjgnet.com
https:// www.wjgnet.com

comment on this has been done in this study. 4. Although the authors stated: <<In this study, the results support the superiority of the Niti-S 14 with a low RBO rate, lack of migration>> This is not totally true as no comparison to other stents has been done in this study. Instead authors compared their 5% stent occlusion to 18% reported to other studies. In partially covered SEMS reported occlusion rate was also 5% as the authors themselves stated in discussion page 13, ref 16, 17. Tumor ingrowth was also reported up to 5% of patients despite large diameter and one death 17 days after stent placement!! 5. The 6-month patency was not superior to previous studies but comparable 91%. In some other studies the 6month patency was ever better up to 94%. So this stent is equal but not superior to previous stents.

PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

Manuscript NO: 35238

Title: New 14-mm diameter Niti-S biliary uncovered metal stent for unresectable distal biliary malignant obstruction

Reviewer's code: 00503623

Reviewer's country: United States

Science editor: Fang-Fang Ji

Date sent for review: 2017-07-14

Date reviewed: 2017-07-14

| 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 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 |
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| <input type="checkbox"/> Grade E: Poor | | <input type="checkbox"/> No | <input type="checkbox"/> Major revision |
| | | BPG Search: | |
| | | <input type="checkbox"/> The same title | |
| | | <input type="checkbox"/> Duplicate publication | |
| | | <input type="checkbox"/> Plagiarism | |
| | | <input type="checkbox"/> No | |

COMMENTS TO AUTHORS

This manuscript, reports on the effectiveness and safety of a newly developed an uncovered self-expandable 14mm X 60 -80mm nitinol stent for the treatment and prevention of the recurrent biliary obstruction due to tumor ingrowth or migration. Based on the data obtained with 38 patients, it is concluded that application of the self-expandable stent, Niti-S 14, resulted in a lower rate of recurrent biliary obstruction, no stent migration, and extended the patient survival rate by about 6 months. This paper is clearly written, well-illustrated with figures showing the stent, stent placement and the endoscopic view after the placement. The number of patients utilized in data analysis is low, indeed.

PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

Manuscript NO: 35238

Title: New 14-mm diameter Niti-S biliary uncovered metal stent for unresectable distal biliary malignant obstruction

Reviewer's code: 02573214

Reviewer's country: Italy

Science editor: Fang-Fang Ji

Date sent for review: 2017-07-14

Date reviewed: 2017-07-20

| CLASSIFICATION | LANGUAGE EVALUATION | SCIENTIFIC MISCONDUCT | CONCLUSION |
|---|--|--|--|
| <input type="checkbox"/> Grade A: Excellent | <input checked="" type="checkbox"/> Grade A: Priority publishing | Google Search: | <input checked="" type="checkbox"/> Accept |
| <input 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 |
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| <input type="checkbox"/> Grade D: Fair | <input type="checkbox"/> Grade D: Rejected | <input type="checkbox"/> Plagiarism | <input type="checkbox"/> Minor revision |
| <input type="checkbox"/> Grade E: Poor | | [Y] No | <input type="checkbox"/> Major revision |
| | | BPG Search: | |
| | | <input type="checkbox"/> The same title | |
| | | <input type="checkbox"/> Duplicate publication | |
| | | <input type="checkbox"/> Plagiarism | |
| | | [Y] No | |

COMMENTS TO AUTHORS

In this manuscript the authors reported the results on the use of a new biliary uncovered metal stent for unresectable biliary malignant obstruction. They described a good number of clinical cases with interesting results.

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Manuscript NO: 35238

Title: New 14-mm diameter Niti-S biliary uncovered metal stent for unresectable distal biliary malignant obstruction

Reviewer's code: 02549032

Reviewer's country: Greece

Science editor: Fang-Fang Ji

Date sent for review: 2017-09-20

Date reviewed: 2017-10-10

Review time: 20 Days

| CLASSIFICATION | LANGUAGE EVALUATION | SCIENTIFIC MISCONDUCT | CONCLUSION |
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| | | <input type="checkbox"/> Duplicate publication | |
| | | <input type="checkbox"/> Plagiarism | |
| | | <input checked="" type="checkbox"/> No | |

COMMENTS TO AUTHORS

This is a well-written, multicenter retrospective study on palliative treatment of unresectable distal malignant biliary obstruction, using uncovered self-expandable metal stent (USEMS) with a large diameter of 14mm (Niti-S 14). The authors concluded that larger diameter Niti-S 14 USEMS stent had low rate of recurrent biliary obstruction (RBO) and made detailed literature review and discussion. Although the issue of palliative treatment of distal malignant biliary obstruction is not new, this study is well written and suitable for publication.

There are some minor issues:

1. A statement is necessary that: <<further prospective, multicenter, international double-blind controlled studies, comparing different type of stents (e.g. UCSEMS v/s partially covered SEMs) are necessary, in order to standardize the best drainage policy.



**Baishideng
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Group**

7901 Stoneridge Drive, Suite 501,
Pleasanton, CA 94588, USA

Telephone: +1-925-223-8242

Fax: +1-925-223-8243

E-mail: bpgoffice@wjgnet.com

https:// www.wjgnet.com

2. No comment regarding cost was done, which could be of interest.