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PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 39367

Title: Upper gastrointestinal tract capsule endoscopy using a nurse-led protocol: first reported experience.

Reviewer's code: 02917331

Reviewer's country: Japan

Science editor: Ze-Mao Gong

Date sent for review: 2018-04-18

Date reviewed: 2018-04-19

Review time: 1 Day

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good		<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	(General priority)	Peer-reviewer's expertise on the topic of the manuscript:
<input type="checkbox"/> Grade E: Do not publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Minor revision	<input type="checkbox"/> Advanced
		<input checked="" type="checkbox"/> Major revision	<input checked="" type="checkbox"/> General
		<input type="checkbox"/> Rejection	<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

In this paper entitled "Upper gastrointestinal tract capsule endoscopy using a nurse-led protocol: first reported experience.", this is an interesting observational study using Upper GI video capsule endoscope. 1. Magnetically guided capsule endoscopy of the



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stomach has been introduced by Rey et al.(Gastrointest Endosc. 2012 Feb;75(2):373-81.) And also large scale clinical trial using magnetically guided capsule endoscopy has already conducted.(J Clin Gastroenterol. 2015 Feb;49(2):101-7.) The authors should cite these studies, and discuss about the difference of Magnetically guided capsule endoscopy and SPIT. 2. In the ABSTRACT, Please spell out "OGD".

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

- The same title
- Duplicate publication
- Plagiarism
- No

BPG Search:

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- No



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PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 39367

Title: Upper gastrointestinal tract capsule endoscopy using a nurse-led protocol: first reported experience.

Reviewer's code: 02462725

Reviewer's country: Japan

Science editor: Ze-Mao Gong

Date sent for review: 2018-04-18

Date reviewed: 2018-04-22

Review time: 4 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input checked="" type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input checked="" type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

This is a pilot study verifying the feasibility of capsule endoscopy for upper GI tract. This study may be valuable with regard to showing the possibility of upper GI screening by capsule endoscopy. 1) The greatest fault of this study is a lack of gold standard i.e.,



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gastroscopy findings of patients who underwent CE. So, the reliability of findings with CE was not validated. The drawback should be indicated as a limitation. 2) Who read the data of CE first? Was he the same as the second reader? 3) The images in the figure 2 are probably champion images that captured the inside of the stomach very clearly. The images that failed to catch clear images of the stomach including images of incomplete studies of the fundus should also be shown.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

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BPG Search:

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- No



PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 39367

Title: Upper gastrointestinal tract capsule endoscopy using a nurse-led protocol: first reported experience.

Reviewer's code: 01489500

Reviewer's country: Afghanistan

Science editor: Ze-Mao Gong

Date sent for review: 2018-04-18

Date reviewed: 2018-04-26

Review time: 8 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good		<input checked="" type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	(General priority)	Peer-reviewer's expertise on the topic of the manuscript:
<input type="checkbox"/> Grade E: Do not publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Minor revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Major revision	<input type="checkbox"/> General
		<input type="checkbox"/> Rejection	<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

This is a well-written article about upper GI capsule endoscopy using a particular protocol. I think that the authors have adequately shown the feasibility of this method which might be an option for patients who decline classic gastroscopy. I believe



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however that the cost of the capsule is still high compared to gastroscopy and also it is more time-consuming, including time for review of the images. (please comment on that in the manuscript). The limitations of the study: it is not a comparative study between capsule and gastroscopy, 2. visualisation of D2 is still suboptimal with capsule and 3. the cost of capsule is high. New prospective comparative studies could be done in the future.

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BPG Search:

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PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 39367

Title: Upper gastrointestinal tract capsule endoscopy using a nurse-led protocol: first reported experience.

Reviewer’s code: 03478442

Reviewer’s country: Greece

Science editor: Ze-Mao Gong

Date sent for review: 2018-04-18

Date reviewed: 2018-05-01

Review time: 13 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input checked="" type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	(General priority)	Peer-reviewer’s expertise on the topic of the manuscript:
<input type="checkbox"/> Grade E: Do not publish	<input type="checkbox"/> Grade D: Rejection	<input checked="" type="checkbox"/> Minor revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Major revision	<input type="checkbox"/> General
		<input type="checkbox"/> Rejection	<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

This is an interesting paper about a new technique of upper gastrointestinal tract upper endoscopy with a specific improved capsule endoscope. Page 7, line 188. The first sentence about the patients is incomplete. It should include the statement “.... Were



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included in the study protocol". Complete examination rate at 64% is rather low. In addition, the examination lasts a long time compared to upper endoscopy, and this might be a problem for non-hospitalized patients. Please mention that with the UGI capsule, no biopsies can be taken for routine and investigation of Helicobacter pylori, which may be necessary for some patients. The same is true if a tumor were found. The use of hyoscine was proven to be a hindrance for the study. Since the reviewer MEM had seen the previous pictures at full mode, he could have remembered the findings when reviewing at the quick mode, even though he watched the capsule videos in a random order. This may cause a false impression and it is considered a major drawback of the study. Please comment. Is this protocol suitable for elderly people? The time difference compared to gastroscopy should be mentioned. The pictures are very nice.

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PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 39367

Title: Upper gastrointestinal tract capsule endoscopy using a nurse-led protocol: first reported experience.

Reviewer's code: 03476438

Reviewer's country: Belgium

Science editor: Ze-Mao Gong

Date sent for review: 2018-04-18

Date reviewed: 2018-05-08

Review time: 20 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	(General priority)	Peer-reviewer's expertise on the topic of the manuscript:
<input type="checkbox"/> Grade E: Do not publish	<input type="checkbox"/> Grade D: Rejection	<input checked="" type="checkbox"/> Minor revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Major revision	<input type="checkbox"/> General
		<input type="checkbox"/> Rejection	<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

Dear authors: The authors reported an observational pilot study on the feasibility, safety and diagnostic yield of a new capsule endoscopy device dedicated for upper-GI tract in pacientes refusing gastroscopy. They concluded this device is accurate, safe and useful



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in selected cases. Methodology seems consistent with a clear protocol of capsule endoscopy administration, position changes and video interpretation and analysis. A dedicated subheader for the statistical analysis should be stated. It's quite surprising the low rate of complete examinations to D2. In addition, the high diagnostic yield could be due to the high number of patients who underwent CE because of oesophageal varices suspicion. It should be interesting to show the diagnostic yield per-patient in a Table and a diagnostic yield per-indication. Figures seems adequate. Pherhaps a comparaisn with previous upper-GI results could be interesting in patients who underwent previous upper-GI endoscopy prior to CE (those with oesophageal varices?). A dedicated paragraph with focus on the limitations of the study seems necessary.
Best,

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