

PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

Manuscript NO: 40613

Title: Polysomnographic assessment of respiratory disturbance during deep propofol sedation for endoscopic submucosal dissection of gastric tumors

Reviewer's code: 02917331

Reviewer's country: Japan

Science editor: Jin-Lei Wang

Date sent for review: 2018-07-05

Date reviewed: 2018-07-09

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 checked="" type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input 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

In this paper entitled "Polysomnographic assessment of respiratory disturbance during deep propofol sedation for endoscopic submucosal dissection of gastric tumors", the authors measured clinical utility of Polysomnography. This observational study is



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interesting, and this is well-written article. I have a comment for the authors. Comment:
Strategies of intervention were fixed in the protocol? For example, If hypoxemia would
be occurred, how long would you watch and stay? how would you treat at first?

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

BPG Search:

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

Manuscript NO: 40613

Title: Polysomnographic assessment of respiratory disturbance during deep propofol sedation for endoscopic submucosal dissection of gastric tumors

Reviewer's code: 01467363

Reviewer's country: Slovenia

Science editor: Jin-Lei Wang

Date sent for review: 2018-07-05

Date reviewed: 2018-07-10

Review time: 5 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 checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

Title and short title (running head): appropriate to define the content of the article.

Key words: six, relevant. Abstract: structured, 189 words, informative. Core tip:

100 words, appropriate. Introduction: 364 words, the reader is acquainted with the

known facts about sedation in endoscopy and the purpose of the study: the authors tested the hypothesis that pulse oximetry underestimates respiratory disturbances during propofol sedation in patients undergoing ESD surgery. Material and methods: 554 words, research methodology is adequately explained (study design, ethical considerations, recruitment of patients – inclusion and exclusion criteria, statistical analysis). Results: 569 words, results are presented in the text, 2 tables (demographic characteristics of patients, details of propofol sedation and results of PSG analysis) and 4 figures (different polysomnographic recordings). Discussion: 1111 words, the authors comment on the results obtained and compare them with those in international literature. They point to two important problems: the nature and severity of respiratory disturbances during propofol sedation and clinical implications of the results of this study. They also draw attention to some limitations of the study: the fact that only 10 elderly patients were involved in the study, propofol sedation was performed by a trained physician, not an anesthesiologist and the study protocol did not assess patient risks for developing upper airway obstruction when unconscious. Based on the results of the study, I would expect recommendations when and in which patients this method of monitoring during endoscopic interventions should be used (appropriate knowledge of physiology, cost of intervention ?....) Conclusion: last paragraph, short, 52 words, the authors conclude with a clear message: episodes of non-hypoxemic obstructive apnea and hypopnea, which are undetectable by pulse oximetry, are common in elderly patients undergoing ESD under propofol-induced sedation. References: 25, from the period 1974 (Br Med J) - 2017 (Am J Gastroenterol), references are appropriate, relevant, included are influential journals in this field (Gastroenterology, Am J Gastroenterol, Gastrointest Endoscopy, Anesthesiology, World J of Gastrointestinal Endoscopy, Surg Endoscopy, Dig Dis Sci ...). Study ethics: the study was approved by the institutional Ethics Committee (#1902-2014, Graduate School of Medicine, Chiba University, Chiba,



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Japan. Unfortunately, the approval document is in Chinese. Conflict of interest: no conflict declared. Source of funding: This work was supported by a grant received from Japan Society for the Promotion of Science KAKENHI (#15K09056). Opinion of the reviewer The study/manuscript is interesting, I suggest to accept the contribution with corrections, mainly in the discussion.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

BPG Search:

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- ☐ No

PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

Manuscript NO: 40613

Title: Polysomnographic assessment of respiratory disturbance during deep propofol sedation for endoscopic submucosal dissection of gastric tumors

Reviewer's code: 03028174

Reviewer's country: Thailand

Science editor: Jin-Lei Wang

Date sent for review: 2018-07-05

Date reviewed: 2018-07-16

Review time: 11 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:
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publish	<input type="checkbox"/> Grade D: Rejection	<input checked="" type="checkbox"/> Major revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

The article is aimed to investigate that polysomnographic monitoring can accurately evaluate respiratory disturbance incidence during sedation for gastrointestinal endoscopy compare to pulse oximetry alone. The title is "Polysomnographic



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assessment of respiratory disturbance during deep propofol sedation for endoscopic submucosal dissection of gastric tumors". 1. This is a prospective observational study. Further randomized controlled trials need to be confirmed. 2. A sample size of the study is relatively small. 3. Several factors influence the outcome of the study. Please discuss these factors. 4. Please review the literature and add more details in the discussion section. 5. What are the new knowledges from this study? 6. Finally, please recommend the readers "How to apply this knowledge for routine clinical practice?".

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