

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Clinical Cases

**Manuscript NO:** 41142

**Title:** Successful endovascular treatment of endoscopically unmanageable hemorrhage from a duodenal ulcer fed by a renal artery: A case report and literature review

**Reviewer's code:** 00068723

**Reviewer's country:** Japan

**Science editor:** Ying Dou

**Date sent for review:** 2018-09-11

**Date reviewed:** 2018-09-11

**Review time:** 6 Hours

| 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 type="checkbox"/> Grade B: Minor language             | (High priority)                                    | <input 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 checked="" 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 type="checkbox"/> Minor revision            | topic of the manuscript:                    |
| publish   | <input type="checkbox"/> Grade D: Rejection                  | <input checked="" 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

The authors reported a case of bleeding from right renal artery successfully treated TAE. Ulcer in the horizontal part was sometimes difficult to diagnose and treat. This manuscript was informative and would be helpful for readers when they encountered



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gastrointestinal bleeding which was difficult to control. The authors' successful outcome should be admirable. Horizontal part of the duodenum is often difficult to approach. Please add the name and company of the endoscopy. Where were the two clipped ulcers? Were they located oral side of Figure 1? Was the ulcer in Figure 1 located in the most anal part? Please show the clipped two ulcers. They would also be informative. Was clipping tried to the ulcer in Figure 1? Did the clipping device reach the ulcer in Figure 1? Please add the results of blood examination in tables. The patient was in shock state. Please present vital signs.

#### **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 Clinical Cases

**Manuscript NO:** 41142

**Title:** Successful endovascular treatment of endoscopically unmanageable hemorrhage from a duodenal ulcer fed by a renal artery: A case report and literature review

**Reviewer's code:** 01213231

**Reviewer's country:** Italy

**Science editor:** Ying Dou

**Date sent for review:** 2018-09-11

**Date reviewed:** 2018-09-18

**Review time:** 7 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

Dear authors I read your interesting paper: congratulations for the successful management of this challenging and interesting case. In an unstable patient many physician usually performe embolization of the feeding vessels of the ulcer even if an



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extravasation could not be seen, you choose another option that was really successful for your patient. Figures are very beautiful. Really if I had to treat a 52 years old woman with emodinamic instability due to bleeding duodenal ulcer after failure of endoscopic management I probably would operate her. I want just to underline some mistakes in the paper: 1. In the title you wrote "literature review" but thereafter in the paper there is just a case report with a discussion and not a really extensive literature review; 2. At page number 4 you wrote that surgical therapy is "surgical duodenectomy", but in the acute management of bleeding peptic ulcer the surgical option usually is not a duodenectomy but a duodenotomy with arterial ligation; 3. At page number 4 you wrote "At our institution, institutional review board approval is not necessary for studies regarding life-threatening emergency cases", I think that it is not necessary in the definitive paper and you can just communicate it to the editor; 4. You wrote that "according to several reports, there is no difference in the therapeutic results between surgery and TAE, and TAE is preferable because it is less invasive and is associated with a shorter hospital stay", I think that it should be written that the scientific evidence is very low (there are only retrospective series, no prospective studies has been published) and that meta-analysis published recently demonstrated some mortality but a higher rebleeding rate was after TAE comparing with salvage surgery.

## **INITIAL REVIEW OF THE MANUSCRIPT**

### ***Google Search:***

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



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