



PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 42404

Title: Short- and Long-term outcomes of endoscopically treated superficial non-ampullary duodenal epithelial tumors

Reviewer’s code: 00724436

Reviewer’s country: France

Science editor: Xue-Jiao Wang

Date sent for review: 2018-10-23

Date reviewed: 2018-10-25

Review time: 2 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 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 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

The authors report the long term outcomes of a large series of patients with duodenal Adenomas resected endoscopically, of which 11 by ESD. the study is not novel , and a large number of studies have reported short term and long term results of this



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technique. However, this study includes the largest number of patients with long term data and a very limited number of patients lost to follow-up. The title is appropriate, the paper reads well, and the figures and tables are appropriate. The discussion The reference section is up to date and complete. The limitations of the study include a poor quality of the English, despite an English proofreading certificate. The term SNADETS should be replaced by SNADA, for sporadic non ampullar duodenal adenoma, that is more often used in the literature. The absence of complications over 136 duodenal EMR is really hard to believe. Were patient admitted to the hospital after EMR ? Is it possible that patients with post EMR complications such as bleeding would have been taken care of in another hospital ?

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 Gastroenterology

Manuscript NO: 42404

Title: Short- and Long-term outcomes of endoscopically treated superficial non-ampullary duodenal epithelial tumors

Reviewer’s code: 02803865

Reviewer’s country: France

Science editor: Xue-Jiao Wang

Date sent for review: 2018-10-18

Date reviewed: 2018-11-01

Review time: 14 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 polishing	(High priority)	<input type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good		<input type="checkbox"/> Accept	<input checked="" 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 type="checkbox"/> Advanced
		<input 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

The authors report results of long-term outcomes in a large series of superficial non-ampullary duodenal epithelial tumors treated by endoscopical resection. The manuscript is well written. However the authors should consider revision before



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publishing. Examples of phrases to revise: "pathological diagnosis" pathology-diagnosis? "// outcomes // were measured based on en bloc and R0 resection": please explain in more detail, to what corresponds the term "outcome" "Pathological diagnosis // consisted of 56 adenocarcinoma //" "Especially" in a particular? avoid repetitive phrases: "This study" "It however remains unknown about clinical course" too general sentence "Due to the rarity //" please simplify same for "Between //" "at present this time" "no one died" none of the patients? "All the cases": all cases? "the results will suggest": the results suggest? "this study showed no occurrence" the results of this study showed no recurrence? "Although it was small number of patients" References: please revise (ex final ".") "perforation in the ulcer": perforation at the ulcer site? "Ulcer findings": do the authors mean the site of post-resection discontinuous mucosa? Indicators (arrows) can be added to figures.

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PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 42404

Title: Short- and Long-term outcomes of endoscopically treated superficial non-ampullary duodenal epithelial tumors

Reviewer’s code: 01467363

Reviewer’s country: Slovenia

Science editor: Xue-Jiao Wang

Date sent for review: 2018-10-23

Date reviewed: 2018-11-02

Review time: 10 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
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			<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: 5, relevant. Abstract: structured, 263 words, informative. Core tip: 97 words, appropriate. Introduction: 361 words, the reader is acquainted with the



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known facts about EMR and ESD in challenging lesions in duodenum. The purpose of the retrospective study was to evaluate the safety, efficacy, and curability of endoscopic treatment in more than one hundred cases of SNADET and to investigate the short- and long-term outcomes. **Material and methods:** 554 words, research methodology is adequately explained (study design, Indications for endoscopic resection, endoscopic procedures, adverse events, surveillance after endoscopic resection, pathologic diagnosis - pathologists were blinded to the endoscopic findings, outcomes, statistical analysis). **Results:** 463 words, results are presented in the text, 5 tables (demographic characteristics of patients and tumors, tumor characteristics in each endoscopic technique, short-term outcomes and adverse events, long-term outcomes of ER for 109 patients with 121 SNADETs, characteristics of recurrence cases after ER) and 3 figures (cap assisted EMR: A - F, ESD method: A - D, study flow diagram). I think that the tables could be more clear and concise. **Discussion:** 863 words, the authors comment on the results obtained and compare them with those in international literature. They emphasize the fact that the study presented is the third largest in terms of patients with SNADETs involved. In the discussion the authors also explain and recommend the "suck and shake technique" of endoscopic resection, cap assisted EMR. They also draw attention to some limitations of the study: retrospective, single-center study, 7.6% of patients (10/131) were lost during the follow-up period and only a small number of ESD procedures was performed. **Conclusion:** last paragraph, short, 36 words, the authors conclude with a clear message about the benefits of endoscopic resection (ER) compared to ESD. **References:** 42, from the period 1976 (Surg Gynecol Obstet) - 2018 (Gastrointest Endosc), references are appropriate, relevant, included are influential journals in this field (Gut, Gastrointest Endoscopy, Endoscopy, World J Gastroenterol...). **Study ethics:** the study was approved by the institutional review board of the Jikei University School of Medicine, Tokyo, Japan, for clinical research (registration number:



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29-079; 8695). Conflict of interest: no conflict declared. Opinion of the reviewer The study/manuscript is interesting, I suggest to accept the contribution with corrections, mainly in presenting the results more clearly and concise.

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