



PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

Manuscript NO: 43175

Title: Narrow band imaging evaluation of duodenal villi in patients with and without celiac disease: a prospective study

Reviewer's code: 02953383

Reviewer's country: Taiwan

Science editor: Ying Dou

Date sent for review: 2018-11-05

Date reviewed: 2018-11-11

Review time: 4 Hours, 6 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 type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input checked="" 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 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 aim to examine the clinical utility of narrow band imaging (NBI) for evaluating morphology of duodenal villi during routine endoscopy based on a prospective cohort study. The authors concluded that NBI appears to have excellent



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diagnostic performance and can facilitate targeting of duodenal biopsies. The authors also found NBI had high negative predictive value and therefore was useful in avoiding biopsies that were likely to reveal histopathologically normal mucosa. This study is well written and is based on a tertiary center and the case number was relatively large. The reviewer only has a few suggestions and comments. 1. Please describe in more detail about the classification of duodenal villi pattern on NBI and pathology since this is the most important part of this study. Representative images of NBI and pathology may be helpful for readers to apply in their clinical practice. 2. In the “Scoring of duodenal villi” in the method section, the normal category of NBI included “isolated increased intra-epithelial lymphocytes” but I don’t think NBI could show the presence of lymphocytes. 3. How many biopsies did the study obtained in each patient? And why only second portion of duodenum was taken biopsy? 4. Please describe the endoscopic experiences of the GI fellow. 5. Did the experienced advanced endoscopist (CJG) and the GI fellow (JHT) also view the white-light images? I guess the performing endoscopist’s decision to biopsy or not to biopsy has been somewhat influenced by the white-light findings. 6. Please explain why experienced endoscopist has lowest sensitivity 56% while the GI fellow has the perfect sensitivity 100%. 7. There were two tables under Table 2 but they seem to be the same content with different arrangements of columns and rows. 8. Figure 1. Suggest change the therapeutic endoscopist to experienced endoscopist as in the main text. In addition, the legend seems too lengthy. 9. I cannot see the figure 2.

INITIAL REVIEW OF THE MANUSCRIPT

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[Y] No

BPG Search:

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[Y] No



PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

Manuscript NO: 43175

Title: Narrow band imaging evaluation of duodenal villi in patients with and without celiac disease: a prospective study

Reviewer’s code: 02505493

Reviewer’s country: Greece

Science editor: Ying Dou

Date sent for review: 2018-11-05

Date reviewed: 2018-11-14

Review time: 20 Hours, 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 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 present study was undertaken to examine the applicability of narrow band imaging for evaluating morphology of duodenal villi and avoiding unnecessary biopsies. The authors describe extensively their strategy and the obtained results. They also notice



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some limitations of the study. However, figure 2 is missing of the m/s, as well as both .tiff files concerning Figures 1 and 2 cannot be found in the initial submission. Nevertheless, the work is very interesting and describes a useful approach for evaluating morphology of duodenal villi, therefore, after the submission of Figures 1 and 2 files, it can be accepted for publication.

INITIAL REVIEW OF THE MANUSCRIPT

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PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

Manuscript NO: 43175

Title: Narrow band imaging evaluation of duodenal villi in patients with and without celiac disease: a prospective study

Reviewer's code: 01047575

Reviewer's country: China

Science editor: Ying Dou

Date sent for review: 2018-11-05

Date reviewed: 2018-11-20

Review time: 14 Hours, 14 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 type="checkbox"/> Grade B: Very good	<input 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
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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

Mucosal biopsies is considered the gold standard for evaluating duodenal villus morphology, but it is a time- and resource-intensive approach. Therefore, a new method to assess duodenal villus morphology is needed. In this study, assess the diagnostic



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accuracy of narrow band imaging (NBI) for evaluating morphology of duodenal villi. This is an interesting topic and significant, but the following problems should be addressed.. 1.In the study, the authors included patients who were suspected of celiac disease. That means the diagnosis was not confirmed. So I do not think the title is appropriate. 2.The data which could reflect the diagnostic accuracy of NBI, such as sensitivity, specificity and their 95% confidence interval should be calculated and listed in the part of abstract and results. 3.The three category convention (normal, partial atrophy and complete atrophy) used in NBI should be described detailed, and representative images should be attached. 4.The manuscript is not prepared. The formal table should be three-lined. Table 2 is repetitive and figure 2 is lost in the manuscript.

INITIAL REVIEW OF THE MANUSCRIPT

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