

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastrointestinal Endoscopy

**Manuscript NO:** 48047

**Title:** Randomized, double-blinded, placebo-controlled trial evaluating simethicone pretreatment with bowel preparation during colonoscopy

**Reviewer's code:** 02445726

**Reviewer's country:** United Kingdom

**Science editor:** Ying Dou

**Reviewer accepted review:** 2019-05-05 23:07

**Reviewer performed review:** 2019-05-06 11:11

**Review time:** 12 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 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 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 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

I can agree with the authors that addition of simethicone (during bowel prep) reduces intraluminal bubbles and improves due to this reason mucosal visibility and it did not demonstrate any significant change in adequacy of bowel cleansing through a higher



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7041 Koll Center Parkway, Suite  
160, Pleasanton, CA 94566, USA  
**Telephone:** +1-925-223-8242  
**Fax:** +1-925-223-8243  
**E-mail:** bpgoffice@wjgnet.com  
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Boston Bowel Preparation Scale (BBPS). However, I am in doubts if Simethicone in the study improves adenoma detection rate (ADR). First of all- the gastroenterologists in the study applied intra procedural irrigations with Simethicone infused water in both groups (patients who had bowel prep with and without Simethicone). The authors claimed that it was the study limitation, but it was prudent. Shell, we understand that after the extra Simethicone irrigation during colonoscopy, a level of bowel cleansing was similar in both groups? In my personal opinion - cleansing the bowel during colonoscopy with water (what is very common to improve bowel prep removing residual stool from the colon) and irrigation with Simethicone, which is able drastically remove bubbles) are really very important approaches during colonoscopy (30% of colonoscopies has significant bubbles) - I do not remove the endoscope until no bubbles in the colon or I cannot improve a quality of bowel prep with water irrigation. Therefore, the authors' statement if the endoscope was removed from the colon even when extra irrigation with Simethicone did not remove bubbles totally from the colon is crucial to assess the value of the study and understand Simethicone impact on ADR. In general, problem with bubbles occurs in the right colon (caecum, ascending colon and the transverse). The authors did not mention if more adenomas were discovered in the whole colon or in the right colon. In other words - the authors assessment regarding bubbles did not concern the sigmoid and the rectum - therefore, we need to know if more adenomas were detected in these segments or more proximal segments. If it concerned flat polyps or tiny polyps or small and/or large polyps (I am convinced that the authors are able to check this, coming back to the results). It's unclear for me why the authors did not assess the caecum - bubbles there can be a real problem without irrigation without Simethicone during colonoscopy. The authors did not randomise gastroenterologists between two groups (with Simethicone and without it) but the question is if they had similar ADR before the study? This criteria is rather never given



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in the articles but it is a very important in my opinion.

#### INITIAL REVIEW OF THE MANUSCRIPT

##### *Google Search:*

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

##### *BPG Search:*

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**Reviewer's code:** 02542970

**Reviewer's country:** China

**Science editor:** Ying Dou

**Reviewer accepted review:** 2019-05-05 12:37

**Reviewer performed review:** 2019-05-09 14:43

**Review time:** 4 Days and 2 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:
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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

This paper make a randomized, Double-Blinded, Placebo-Controlled Trial Evaluating Simethicone Pretreatment with Bowel Preparation during Colonoscopy, it had some clinical value.



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