



**PEER-REVIEW REPORT**

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

**Manuscript NO:** 49758

**Title:** Secondary angiodysplasia-associated gastrointestinal bleeding in end-stage renal disease: Results from the nationwide inpatient sample

**Reviewer’s code:** 03706560

**Reviewer’s country:** United States

**Science editor:** Jia-Ping Yan

**Reviewer accepted review:** 2019-06-19 12:13

**Reviewer performed review:** 2019-06-20 17:50

**Review time:** 1 Day and 5 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 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 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**

Thank you for the opportunity to review your study. This is an interesting study. My major concern is is that the database was evaluated from 2009 to 2014? Why not included patients from 2014 to 2019? The paper appears to be wrote 5 years ago based on methods



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and references. I also have several minor concerns that I think you improve your study as you see below: Abstract: - The Nationwide Inpatient Sample database from 2009 to 2014 -Why you did not include patients in the last 5 years? - please add more key words. Select mesh terms such as "gastrointestinal", "renal"., "hemorrhage". Core tip: Do not use just abbreviations without describe what it means before. For example: End-stage renal disease (ESRD) and gastrointestinal (GI). Introduction: - from 1996 to 2003: please search a more recent data. - add new references with references 5-7, for example: Brito HP, Ribeiro IB, de Moura DTH, et al. Video capsule endoscopy vs double-balloon enteroscopy in the diagnosis of small bowel bleeding: A systematic review and meta-analysis. World J Gastrointest Endosc. 2018 Dec 16;10(12):400-421. - wireless capsule endoscopy change for video capsule endoscopy -Material and Methods - This retrospective study utilized the Nationwide Inpatient Sample (NIS), 2009 to 2014. - why not 2019 or at least 2018? - This retrospective study utilized the Nationwide Inpatient Sample (NIS), 2009 to 2014 [12,13) -References 12,13 do not appears to be accurate. - These missing data points were either analyzed as their own "Unknown" group or were grouped with the "Other" group, whatever was most appropriate. - please explain this information in details. Results: - please correct: United Sates to United States - Table 2: what REF means? - please include label - supplementary table: AIDS is accurate or you mean HIV+? Discussion: In general the discussion is great. I made few comments below: - Our study showed that over a 5-year period from 2009-2014, 5,505,252 patients were hospitalizations with the diagnoses of end-stage - needs English review. - use GI besides gastrointestinal. - you do not need to say Marwan et al 2 x. - please comment on these findings: Medicare had the highest rate of Angiodysplasia associated-GI bleeding (0.50% of ESRD hospitalizations) and Self-Pay hospitalizations had significantly lower odds of Angiodysplasia associated-GI bleeding (OR: 0.32; 95% CI: 0.20, 0.51; P<0.0001) than Medicare patients. - include your comment on discussion section. References: References



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are very old. You just have 2 references after 2016. Looking forward for your answers.  
Thank you.

#### **INITIAL REVIEW OF THE MANUSCRIPT**

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

- The same title
- Duplicate publication
- Plagiarism
- No

##### ***BPG Search:***

- The same title
- Duplicate publication
- Plagiarism
- No



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

**Manuscript NO:** 49758

**Title:** Secondary angiodysplasia-associated gastrointestinal bleeding in end-stage renal disease: Results from the nationwide inpatient sample

**Reviewer’s code:** 03026750

**Reviewer’s country:** Egypt

**Science editor:** Jia-Ping Yan

**Reviewer accepted review:** 2019-06-19 09:36

**Reviewer performed review:** 2019-06-25 16:48

**Review time:** 6 Days and 7 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 checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
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<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**

Very important topic. However, I have some comments: 1. why was the study only from 2009 to 2014, why the last 5 years were not included? 2. The 4th paragraph in introduction you mentioned wireless capsule (Video capsule VCE) and also did not



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mention double balloon enteroscopy 3. If possible to describe the site, size and type of angiodysplasia in this patients

#### **INITIAL REVIEW OF THE MANUSCRIPT**

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- No

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- No