



**PEER-REVIEW REPORT**

**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 51656

**Title:** Validation of the prognostic value of risk scoring systems for cirrhotic patients with acute variceal bleeding: A retrospective cohort study

**Reviewer’s code:** 04870360

**Position:** Peer Reviewer

**Academic degree:** PhD

**Professional title:** Lecturer, Research Scientist

**Reviewer’s country:** Egypt

**Author’s country:** China

**Reviewer chosen by:** Artificial Intelligence Technique

**Reviewer accepted review:** 2019-09-26 16:01

**Reviewer performed review:** 2019-09-29 07:06

**Review time:** 2 Days and 15 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 checked="" 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 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**



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Regarding the manuscript entitled "Validation of the prognostic value of risk scoring systems for cirrhotic patients with acute variceal bleeding: A retrospective cohort study", the study has some interesting points; well-written and coherent. however, I have some points: 1- What is the significance of this manuscript even the similarity with other previous studies, <https://doi.org/10.5604/16652681.1222107> and DOI: 10.1016/j.cgh.2009.08.011. 2- Statistical analysis should be revised.

#### **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 Gastroenterology

**Manuscript NO:** 51656

**Title:** Validation of the prognostic value of risk scoring systems for cirrhotic patients with acute variceal bleeding: A retrospective cohort study

**Reviewer's code:** 00030603

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Professor

**Reviewer's country:** Greece

**Author's country:** China

**Reviewer chosen by:** Artificial Intelligence Technique

**Reviewer accepted review:** 2019-09-26 05:02

**Reviewer performed review:** 2019-09-29 14:15

**Review time:** 3 Days and 9 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 checked="" 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 checked="" 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 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

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none

#### 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 Gastroenterology

**Manuscript NO:** 51656

**Title:** Validation of the prognostic value of risk scoring systems for cirrhotic patients with acute variceal bleeding: A retrospective cohort study

**Reviewer’s code:** 03253490

**Position:** Editorial Board

**Academic degree:** MD

**Professional title:** Assistant Professor, Doctor

**Reviewer’s country:** Turkey

**Author’s country:** China

**Reviewer chosen by:** Artificial Intelligence Technique

**Reviewer accepted review:** 2019-09-28 12:49

**Reviewer performed review:** 2019-10-02 07:13

**Review time:** 3 Days and 18 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 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

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Tantai et al. aimed to validate and compare the overall performance of selected prognostic scoring systems for predicting in-hospital outcomes in cirrhotic patients with variceal bleeding. The topic is interesting. Some issues raised: 1-In abstract and introduction: Some abbreviations have no descriptions ( for example CTP, CANUKA). 2–In method and results: Variceal bleedings have different patterns according to the localization of the varices. So the mortality and the morbidity rates are different. In this study, all variceal bleedings are included (gastric?esophageal?). The authors must give more information about this point. Endoscopic treatments used for variceal bleeding are also effect the mortality and the morbidity rates. So the authors must give information about these treatments. Statistics should be renewed after these changes. Thank you for givinig opportunity to review this study. Yours sincerely.

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

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

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- Plagiarism
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##### ***BPG Search:***

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- Duplicate publication
- Plagiarism
- No



**PEER-REVIEW REPORT**

**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 51656

**Title:** Validation of the prognostic value of risk scoring systems for cirrhotic patients with acute variceal bleeding: A retrospective cohort study

**Reviewer's code:** 03024263

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Professor

**Reviewer's country:** Russia

**Author's country:** China

**Reviewer chosen by:** Jie Wang

**Reviewer accepted review:** 2019-10-02 06:53

**Reviewer performed review:** 2019-10-03 11:54

**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

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The authors validated and compared the overall some effectiveness of well-known prognostic scoring systems for predicting in-hospital outcomes in cirrhotic patients with variceal bleeding. Indeed, recent international recommendations endorsed using Rockall risk scoring score (CRS), AIMS65 score (AIMS65), Glasgow-Blatchford score (GBS), modified GBS as well as the new scoring system CANUKA for the management of NON-VARICEAL UGIB patients. However, it is well recognized that patients with variceal bleeding constitute a specific and high risk group, with outcome largely dependent on the values of the hepatic venous pressure gradient (HVPG), measured within 24 hours after stabilization of hemodynamics, exceeding 20 mm Hg, as well as the severity of underlying liver disease as assessed by the Childs-Turcotte-Pugh (CTP) score or model for end stage liver disease (MELD). In addition, these predictors include impaired renal function, bacterial infection, hypovolemic shock, active esophageal variceal bleeding during endoscopy and early relapse with the need for transfusion of more than 4 doses of packed red blood cells, the presence of hepatocellular carcinoma and portal vein thrombosis. Therefore, the use of for predicting in-hospital outcomes in cirrhotic patients with variceal bleeding of prognostic scoring systems the management of NON-VARICEAL UGIB in my perception is not correct. I have a few questions. 1. Did the treatment of patients with variceal bleeding meet current requirements and what was it? 2. How was portal pressure evaluated? If HVPG was not measured, were alternative methods used? The study has a number of limitations which are indicated by the authors themselves.

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

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Plagiarism

No

***BPG Search:***

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Plagiarism

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**PEER-REVIEW REPORT**

**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 51656

**Title:** Validation of the prognostic value of risk scoring systems for cirrhotic patients with acute variceal bleeding: A retrospective cohort study

**Reviewer’s code:** 02527808

**Position:** Editor-in-Chief

**Academic degree:** MD

**Professional title:** Professor

**Reviewer’s country:** Egypt

**Author’s country:** China

**Reviewer chosen by:** Artificial Intelligence Technique

**Reviewer accepted review:** 2019-09-28 02:20

**Reviewer performed review:** 2019-10-05 01:26

**Review time:** 6 Days and 23 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 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 type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
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A well written manuscript dealing with critical issue in cirrhotic patients. but some points to be discussed: 1- In the demographic data the endoscopic finding must be clarified eg grading of esophgeal varcies , Types of gastric varcies and No of each 2- the relation of recurrence of bleeding to the grading and types of varcies 3- some studies need to be added to the discussion: • A large multinational prospective trial demonstrated the GBS to be superior to the AIMS65 in predicting need for intervention (transfusion, endoscopic treatment, IR, or surgery) or rebleeding, although the AIMS65 remained a better predictor of mortality (Stanley 2017). - Vinaya et al observed statistically significant correlation between AIMS65 score and length of hospitalization and mortality in noncirrhotic patients. We found that AIMS65 score paralleled the endoscopic grading of lesion causing UGIB in noncirrhotics. AIMS65 score correlated only with mortality but not the length of hospitalization or endoscopic stigmata of bleed in cirrhotics. (Vinaya Gaduputi, Molham Abdulsamad, Hassan Tariq, et al., "Prognostic Value of AIMS65 Score in Cirrhotic Patients with Upper Gastrointestinal Bleeding," Gastroenterology Research and Practice, vol. 2014, Article ID 787256, 8 pages, 2014. <https://doi.org/10.1155/2014/787256>).

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- Plagiarism
- No

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

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