



PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 54899

Title: Nomogram for predicting transmural bowel infarction in patients with acute superior mesenteric venous thrombosis

Reviewer's code: 03662809

Position: Peer Reviewer

Academic degree: MD

Professional title: Associate Professor

Reviewer's Country/Territory: Brazil

Author's Country/Territory: China

Manuscript submission date: 2020-02-25

Reviewer chosen by: Jia-Ping Yan

Reviewer accepted review: 2020-05-10 20:10

Reviewer performed review: 2020-05-11 13:05

Review time: 16 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



**Baishideng
Publishing
Group**

7041 Koll Center Parkway, Suite
160, Pleasanton, CA 94566, USA
Telephone: +1-925-399-1568
E-mail: bpgoffice@wjgnet.com
https://www.wjgnet.com

SPECIFIC COMMENTS TO AUTHORS

The study deals with an interesting theme, concerning the prediction of transmural bowel infarction (TBI) in patients with acute mesenteric ischemia (AMI) due to superior mesenteric venous thrombosis (SMVT). The patients included in the study came from two distinct hospitals (multicenter study) and their number was considerable. The discussion section gave emphasis to the new contribution of the study in its field. The authors stated that they constructed and externally validated the nomogram to predict TBI in patients with acute SMVT, which gave novelty to the study. The limitations of the study were also described. The figures and tables are informative and aesthetically pleasing. Therefore, the manuscript presents sufficient quality to be published in this journal.



PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 54899

Title: Nomogram for predicting transmural bowel infarction in patients with acute superior mesenteric venous thrombosis

Reviewer's code: 02465209

Position: Editorial Board

Academic degree: MD

Professional title: Doctor, Surgeon

Reviewer's Country/Territory: United States

Author's Country/Territory: China

Manuscript submission date: 2020-02-25

Reviewer chosen by: Jia-Ping Yan

Reviewer accepted review: 2020-05-11 16:44

Reviewer performed review: 2020-05-11 17:05

Review time: 1 Hour

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



**Baishideng
Publishing
Group**

7041 Koll Center Parkway, Suite
160, Pleasanton, CA 94566, USA
Telephone: +1-925-399-1568
E-mail: bpgoffice@wjgnet.com
https://www.wjgnet.com

SPECIFIC COMMENTS TO AUTHORS

Very interesting paper. Outside of temperature did you assess other vital signs or change in signs like heart rate, respiration rate and blood pressure? Did you consider trying a lower value of c-reactive protein?



PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 54899

Title: Nomogram for predicting transmural bowel infarction in patients with acute superior mesenteric venous thrombosis

Reviewer's code: 02547883

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Associate Professor

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2020-02-25

Reviewer chosen by: Jia-Ping Yan

Reviewer accepted review: 2020-05-10 03:18

Reviewer performed review: 2020-05-12 13:59

Review time: 2 Days and 10 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



**Baishideng
Publishing
Group**

7041 Koll Center Parkway, Suite
160, Pleasanton, CA 94566, USA
Telephone: +1-925-399-1568
E-mail: bpgoffice@wjgnet.com
https://www.wjgnet.com

SPECIFIC COMMENTS TO AUTHORS

This study was conducted to stratify the risk of mesenteric venous thromboembolism (MVT) developing to bowel infarction by nomogram established from two independent retrospective cohorts. The incidence of acute abdomen or mesenteric ischemia caused by MVT itself was relatively low, however the mortality after developing intestinal gangrene was reportedly ranged high and mostly lethal. The training cohort was thoroughly examined by multiple logistic regression model and nomogram by four independent risk factor significantly predicted TBI in validation cohort.



PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 54899

Title: Nomogram for predicting transmural bowel infarction in patients with acute superior mesenteric venous thrombosis

Reviewer's code: 02959015

Position: Editorial Board

Academic degree: MD

Professional title: Associate Professor

Reviewer's Country/Territory: Italy

Author's Country/Territory: China

Manuscript submission date: 2020-02-25

Reviewer chosen by: Jia-Ping Yan

Reviewer accepted review: 2020-05-11 07:53

Reviewer performed review: 2020-05-13 10:09

Review time: 2 Days and 2 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



**Baishideng
Publishing
Group**

7041 Koll Center Parkway, Suite
160, Pleasanton, CA 94566, USA
Telephone: +1-925-399-1568
E-mail: bpgoffice@wjgnet.com
https://www.wjgnet.com

SPECIFIC COMMENTS TO AUTHORS

In this paper the authors aim to develop and externally validate a nomogram for prediction of transmural bowel infarction (TBI) in patients with acute superior mesenteric venous thrombosis (SMVT). The authors conclude that the nomogram achieved an optimal prediction of TBI in patients with AMI. Using the model, the risk for an individual patient inclined to TBI can be assessed and this can lead to a rational therapeutic choice. Minor Revisions

A) MATERIALS AND METHODS section Patients, Page 8 lines 15 16: Two senior radiologists reviewed all CT images. The authors should define what the k concordance of the two senior radiologists was and in the statistical section indicate that is used the k concordance. I suggest to anticipate the statistical analysis section after the outcomes section and so to anticipate the lines 1-4 of the current page 12 and then do follow the current sections Data collection, Construction of the nomogram, Performance of the nomogram, Clinical use assessment. B) Some of the variables mentioned in table 1 do not seem to me with a Gaussian distribution, the authors if it is true what I suppose, should evaluate and verify and in this case they should report the variables as median (min-max) or median and IQR. They should also indicate in the statistical analysis section how the variables are described. C) The authors should indicate which statistical tests were used in table 1 in the statistical analysis section and according to whether the distribution is Gaussian or non-Gaussian use the appropriate tests. D) 12 patients with SMVT are excluded in table 1 and are not reported in the results E) In the results section page 13 section Characteristics of the study population the authors state: There were no differences...; actually some variables show significant differences, it is necessary that the authors verify or correct. F) Results section: I am surprised that in a venous ischemia the D Dimer is not significantly increased. The authors use as cut off > 0.5mg / L, did they evaluate whether there are other cut-offs to



**Baishideng
Publishing
Group**

7041 Koll Center Parkway, Suite
160, Pleasanton, CA 94566, USA
Telephone: +1-925-399-1568
E-mail: bpgoffice@wjgnet.com
https://www.wjgnet.com

which the D Dimer could be useful and statistically significant? G) Liver Cirrhosis and therefore the consequent portal hypertension are considered risk factors in the literature, is it possible that the lack of significance at the multivariate analysis depend on the number of cases? If the answer is yes, the authors should report in the results how many patients with cirrhosis were in the series and report it in the discussion. H) Discussion seems to me to be studied in deep, however I suggest to shorten it because it is very long. I congratulate the authors for the captions to the figures very explicative and complete.



PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 54899

Title: Nomogram for predicting transmural bowel infarction in patients with acute superior mesenteric venous thrombosis

Reviewer's code: 03475242

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Professor

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2020-02-25

Reviewer chosen by: Jia-Ping Yan

Reviewer accepted review: 2020-05-10 00:48

Reviewer performed review: 2020-05-17 07:23

Review time: 7 Days and 6 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



**Baishideng
Publishing
Group**

7041 Koll Center Parkway, Suite
160, Pleasanton, CA 94566, USA
Telephone: +1-925-399-1568
E-mail: bpgoffice@wjgnet.com
https://www.wjgnet.com

SPECIFIC COMMENTS TO AUTHORS

This study aimed to develop and externally validate a nomogram for prediction of transmural bowel infarction (TBI) in patients with acute superior mesenteric venous thrombosis, and the nomogram achieved an optimal prediction of TBI. This is an interesting study; however, I have the following questions and comments. (1) The optimal cutoff value of the Nomo-score was determined to be 90. According to your nomogram as shown in Figure 2A, the score 90 means that one of three factors (DVT history, rebound tenderness, and decreased bowel wall enhancement) is positive. Is this correct? If this is correct, it is much easier to remember the risk factors for TBI, as compared to the score, and you emphasize these clinical factors in the text. (2) As you mentioned in the section of discussion, evaluation of decreased bowel wall enhancement on enhanced CT was influenced by interpretation of each radiologist, which may vary among them. Did you examine the association between the length of decreased bowel wall enhancement and transmural bowel infarction?