

## PEER-REVIEW REPORT

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

**Manuscript NO:** 56454

**Title:** Endoscopic approach to gastric remnant outlet obstruction after gastric bypass: A case report

**Reviewer's code:** 02441274

**Position:** Editorial Board

**Academic degree:** FACC, FASGE, MD

**Professional title:** Adjunct Professor, Professor

**Reviewer's Country/Territory:** India

**Author's Country/Territory:** United States

**Manuscript submission date:** 2020-05-12

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2020-05-13 01:49

**Reviewer performed review:** 2020-05-15 05:06

**Review time:** 2 Days and 3 Hours

<b>Scientific quality</b>	<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 Grade E: Do not publish
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<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
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Peer-reviewer statements</b>	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 exciting case of GOO, treated by EDGI of the excluded stomach, has been discussed. This is an unusual case which was efficiently managed by EDGI and Angioembolisation. However, I would suggest - 1) To add a brief procedural description of gastro-gastrostomy as it is challenging in this case. 2) Discuss regarding the closure of fistula if planned, after LAMS removal as it is the third stage of any EDGI. 3) It would be worthwhile to introduce pre and post-angioembolisation image 4) Please ensure that the references are written as per journal standards. 5) Few grammatical errors like inconsistent hyphenation for gastro-gastrostomy and article should be corrected.