

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Clinical Cases

**Manuscript NO:** 56545

**Title:** Endoscopic submucosal dissection as alternative to surgery for complicated gastric heterotopic pancreas

**Reviewer's code:** 04087607

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

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

**Author's Country/Territory:** South Korea

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<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" 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 Grade E: Do not publish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 type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input 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**

The topic of this study is interesting. ESD was invented as a local treatment method for gastrointestinal neoplasms. Recently ESD has been applied to other tumors including gastric submucosal tumors. However, there are some concerns in this manuscript.

Comment #1 This study included only five cases. Therefore, this study is appropriate not for retrospective study but for case series. Please change appropriate article style.

#2 The efficacy and safety of ESD for gastric submucosal tumors have been already reported. Are there any reason to focus on gastric heterotopic pancreas? Please clarify the difference of ESD between gastric heterotopic pancreas and other gastric submucosal tumors. #3 Was gastric heterotopic pancreas diagnosed by biopsy or EUS-FNAB? #4

Please show the number of patients who achieved successful conservative management without ESD during study period. #5 Please mention the reason for selecting not EMR but ESD. EMR seems to be appropriate for the local treatment of gastric heterotopic pancreas because lower complication rate in EMR than that in ESD was reported.

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Clinical Cases

**Manuscript NO:** 56545

**Title:** Endoscopic submucosal dissection as alternative to surgery for complicated gastric heterotopic pancreas

**Reviewer's code:** 05386889

**Position:** Peer Reviewer

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

**Author's Country/Territory:** South Korea

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<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input checked="" 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 type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input checked="" 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

#### **SPECIFIC COMMENTS TO AUTHORS**

- There is no indication of ESD for lesions that extend to the muscularis propria layer.
- Follow-up schedule is unclear.
- Figure2 is wrong.

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Clinical Cases

**Manuscript NO:** 56545

**Title:** Endoscopic submucosal dissection as alternative to surgery for complicated gastric heterotopic pancreas

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**Author's Country/Territory:** South Korea

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<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 type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input 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

## **SPECIFIC COMMENTS TO AUTHORS**

This manuscript evaluated the availability and effectiveness of endoscopic submucosal dissection (ESD) for the treatment of complicated gastric heterotopic pancreas (GHP). The authors performed ESD for GHP in 5 patients, and a favorable long-term outcome without any complications was achieved in all five cases. As this article presented a promising, low-invasive, alternative treatment for the resection of GHP, the results will be of interest to clinicians in the field. However, the following major and minor issues require clarification: Major 1. ESD for GHP has concerns including the risk of incomplete resection and perforation. Therefore, the vertical margin of the resected specimens is a notable point. The authors should clarify which layer they intended to dissect while performing ESD, by showing histological images of the resected specimens of each patient. Furthermore, the authors should discuss the technical difficulties associated with ESD for GHP in detail. Minor 1. (Figure 2) The clinical course of Patient 3 appears to have overlapped. 2. (Figure 2) The authors should also show the clinical course of Patients 2 and 5. 3. The pancreatic enzyme levels in Patient 5 seems to be within the normal limits. 4. (Table 1) The authors should add the histological findings of all resected specimens. 5. Please describe the location of the patients' abdominal pain in more detail. 6. Did the authors perform EUS after ESD to try and identify any remnant pancreatic tissues or cystic lesions at the site of the ESD scar? 7. Can the histological findings of only foreign body reactions and calcification be seen after pancreatitis in GHP? The authors should refer previous reports in the pertinent literature which described the histological findings of GHP.

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Clinical Cases

**Manuscript NO:** 56545

**Title:** Endoscopic submucosal dissection as alternative to surgery for complicated gastric heterotopic pancreas

**Reviewer's code:** 05058806

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

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

**Author's Country/Territory:** South Korea

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**Review time:** 4 Days and 13 Hours

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<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input checked="" 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 type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input 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

#### **SPECIFIC COMMENTS TO AUTHORS**

1. Is EUS-FNA indicated for ectopic pancreas to ensure prior diagnosis? Did patients 3 and patient 4 need to undergo ESD? 2. There is too much discrepancy between EUS findings and pathological findings in the case of Figure 1. Did you intend to perform full-thickness excision according to the EUS findings? How do you identify the resection line of the proper muscle layer? 3. Pathological figures of cases in which the lesion extends to the muscle layer should also be presented 4. Zhou et al. World Journal of Surgical Oncology(2019)17:69 paper should be cited



## PEER-REVIEW REPORT

**Name of journal:** World Journal of Clinical Cases

**Manuscript NO:** 56545

**Title:** Endoscopic submucosal dissection as alternative to surgery for complicated gastric heterotopic pancreas

**Reviewer's code:** 03867924

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

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

**Author's Country/Territory:** South Korea

**Manuscript submission date:** 2020-05-11

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<b>Scientific quality</b>	<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
<b>Language quality</b>	<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
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input checked="" type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input 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

## **SPECIFIC COMMENTS TO AUTHORS**

In this case-series study, Jin Hee Noh et al. Asan Medical Center, University of Ulsan College of Medicine, Seoul, Korea investigated the clinical outcomes of endoscopic submucosal dissection as an alternative to surgical resection for the complicated gastric heterotopic pancreas. In general, it was a well-written and interesting paper, showing ESD as an available option for GHP. However, I have a few comments on this study:

Major

Several previous reports already described the clinical outcomes of the ESD for GHP:

- Zhong YS, Shi Q, Yao LQ, Zhou PH, Xu MD, Wang P. Endoscopic mucosal resection/endoscopic submucosal dissection for gastric heterotopic pancreas. *Turk J Gastroenterol.* 2013;24(4):322 - 329.
- Makarewicz W, Bobowicz M, Dubowik M, Kosinski A, Jastrzebski T, Jaskiewicz J. Endoscopic submucosal dissection of gastric ectopic pancreas. *Wideochir Inne Tech Maloinwazyjne.* 2013;8(3):249 - 252. doi:10.5114/wiitm.2011.33709
- Liu X, Wang G, Ge N, et al. Endoscopic removal of symptomatic gastric heterotopic pancreas: a report of nine cases. *Surg Innov.* 2013;20(6):NP40 - NP46. doi:10.1177/1553350613499453

Therefore, I do not think the results or conclusions made in this manuscript adds anything novel to the current knowledge. Minor: In figure 2 the part - A (Patient 1) is missing, instead of it, part B (patient 3) is replicated.

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Clinical Cases

**Manuscript NO:** 56545

**Title:** Endoscopic submucosal dissection as alternative to surgery for complicated gastric heterotopic pancreas

**Reviewer's code:** 03479326

**Position:** Peer Reviewer

**Academic degree:** MD, PhD

**Professional title:** Chief Physician, Doctor

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

**Author's Country/Territory:** South Korea

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<b>Language quality</b>	<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
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input 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

## **SPECIFIC COMMENTS TO AUTHORS**

The authors summarized 5 cases of ESD for symptomatic gastric heterotopic pancreas. It is an interesting report, but there are some questions. 1. As there were only 5 cases, the authors should use range instead of IQR for the continuous variables (age, size, procedure time, etc.). 2. The EUS findings showed that all of the lesions were involved the muscular propria. The ESD technique is a method to dissect the submucosal layer, so why did the authors decided to select ESD for the lesion deeper than the submucosal layer? 3. The pathological findings of case 1 and 2 showed that the mucosal muscular propria was included in the ESD resected specimen. Didn't they have a complication of perforation? 4. In case 1 and 2, the margins of the resected lesions were positive. Thus, it is likely that the tissue of heterotopic pancreas remained. Did the symptoms improve or remain after ESD? 5. In case 3 and 4, the tissue of the heterotopic pancreas itself was not included in the resected tissue. Thus, the causative lesion of the symptoms was not removed. Why can it be considered as an effective treatment? 6. What were the main pathological diagnosis of case 1, 2 and 5? There were only descriptions about the margins. 7. The symptoms improved after ESD in case 3, 4, and 5, but they should consider the length of the follow-up period after the ESD. The median of it was described in the Discussion section, but the results should be described in the Results section. 8. According to the suspicions described above, I suppose that it is difficult to conclude ESD as an effective and feasible treatment option for heterotopic pancreas. Rather, surgery can be considered as better as it can remove the lesion completely and reliably. Therefore, the descriptions in the Discussion are too strong. 9. In the method section, the authors diagnosed all of the involved lesions as "complicated GHP" before ESD procedure, but they also defined one of the criteria of "complicated GHP" as symptom resolution after ESD. Here's a contradiction. 10. The effect of the ablation of



**Baishideng  
Publishing  
Group**

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

ESD may have some effect for small remnant tissue, but some of the remnant tissues were suspected as 10 mm or larger. Isn't the description of Page 7 Line 24 an overstatement? 11. Figure 2B was drawn in Figure 2A. Please replace it to the correct figure. 12. In Table 1, "Procedure time" is supposed to be "ESD procedure time". As for "Hospitalization", is it for ESD? Then, "ESD hospitalization" is better. 13. In Table 1, description of CT findings are not findings, but diagnosis. Findings should be like high/low density, contrast effect, edematous change, etc.

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Clinical Cases

**Manuscript NO:** 56545

**Title:** Endoscopic submucosal dissection as alternative to surgery for complicated gastric heterotopic pancreas

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**Professional title:** Doctor

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<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

## **SPECIFIC COMMENTS TO AUTHORS**

This manuscript shows 5 cases of gastric heterotopic pancreas treated by ESD. A case of gastric heterotopic pancreas treated by ESD is rare. However, the number of cases is few, and authors only indicate clinical characteristics and CT, EUS and endoscopic findings of these cases in this retrospective study. In addition, the followings are the comments and questions to the authors. Major comments: 1. How did authors diagnose these cases as gastric heterotopic pancreas (GHP)? Histologically, pancreatic tissue was not found in the resected specimen except Patient 5 (Figure 1). Therefore, the diagnosis of GHP may be uncertain in each case. Authors should indicate the histological findings of all patients in Table 1. 2. After the ESD, all patients received endoscopy annually thereafter. Did patients receive EUS at the time of endoscopy? In addition, did endoscopy and EUS not reveal recurrence of GHP in all patients during the follow-up period? ESD may be insufficient for GHP that invaded the proper muscle layer. 3. Authors should indicate the method of conservative management. Minor comments: 1. Authors should show the endoscopic image of (A) patient 1. In Figure 2.

## RE-REVIEW REPORT OF REVISED MANUSCRIPT

**Name of journal:** World Journal of Clinical Cases

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**Title:** Endoscopic submucosal dissection as alternative to surgery for complicated gastric heterotopic pancreas

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<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 checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<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

## SPECIFIC COMMENTS TO AUTHORS



This manuscript was well revised. In addition, the response to our comments was appropriate.

## RE-REVIEW REPORT OF REVISED MANUSCRIPT

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**Title:** Endoscopic submucosal dissection as alternative to surgery for complicated gastric heterotopic pancreas

**Reviewer's code:** 05194798

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<b>Language quality</b>	<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
<b>Conclusion</b>	<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
<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

## SPECIFIC COMMENTS TO AUTHORS

The manuscript is improved enough to accept.

## RE-REVIEW REPORT OF REVISED MANUSCRIPT

**Name of journal:** World Journal of Clinical Cases

**Manuscript NO:** 56545

**Title:** Endoscopic submucosal dissection as alternative to surgery for complicated gastric heterotopic pancreas

**Reviewer's code:** 05058806

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<b>Language quality</b>	<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
<b>Conclusion</b>	<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
<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

## SPECIFIC COMMENTS TO AUTHORS



**Baishideng  
Publishing  
Group**

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

Manuscript is well corrected according to Peer-reviewer's comment.