

PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

Manuscript NO: 60294

Title: Best practices for prevention of post-ERCP pancreatitis

Reviewer's code: 04653244

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Associate Professor

Reviewer's Country/Territory: Japan

Author's Country/Territory: United States

Manuscript submission date: 2021-01-27

Reviewer chosen by: Jin-Lei Wang

Reviewer accepted review: 2021-03-05 02:36

Reviewer performed review: 2021-03-13 01:25

Review time: 7 Days and 22 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 Grade E: Do not publish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

SPECIFIC COMMENTS TO AUTHORS

The paper is clearly written and shows the clinical importance to prevent and manage PEP for readers.

PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

Manuscript NO: 60294

Title: Best practices for prevention of post-ERCP pancreatitis

Reviewer's code: 05420387

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Assistant Professor

Reviewer's Country/Territory: Italy

Author's Country/Territory: United States

Manuscript submission date: 2021-01-27

Reviewer chosen by: Jin-Lei Wang

Reviewer accepted review: 2021-03-05 08:59

Reviewer performed review: 2021-03-20 15:55

Review time: 15 Days and 6 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

SPECIFIC COMMENTS TO AUTHORS

I thank the Editors for the opportunity to review this interesting paper. Weissman and colleagues wrote a review on post-ERCP pancreatitis and best prevention practices for this disease. The paper is fairly written, and clear, and results are supported by study findings. However, there are some issues that should be addressed:

- APPROACH TO DIAGNOSIS PEP: I do not agree with authors on this point. Although consensus criteria has long been used for post ERCP pancreatitis diagnosis, there is evidence that revised atlanta criteria are superior for risk stratification and prognosis. See for instance Smeets X, Bouhouch N, Buxbaum J, Zhang H, Cho J, Verdonk RC, Römkens T, Venneman NG, Kats I, Vrolijk JM, Hemmink G, Otten A, Tan A, Elmunzer BJ, Cotton PB, Drenth J, van Geenen E. The revised Atlanta criteria more accurately reflect severity of post-ERCP pancreatitis compared to the consensus criteria. *United European Gastroenterol J*. 2019 May;7(4):557-564.).
- The review is very short and do not comprise some relevant points in this field

1) Increasing AGE of population affected by acute pancreatitis is indeed one on the biggest challenge for present and next years. Acute pancreatitis in elderly and very elderly could present differently and have different outcomes. Older Age is a risk factor for post ERCP pancreatitis. Authors should elaborate this point. See for instance: Quero G, Covino M, Fiorillo C, Rosa F, Menghi R, Simeoni B, Potenza A, Ojetti V, Alfieri S, Franceschi F. Acute pancreatitis in elderly patients: a single-center retrospective evaluation of clinical outcomes. *Scand J Gastroenterol*. 2019 Apr;54(4):492-498; Deutsch L, Matalon S, Phillips A, Leshno M, Shibolet O, Santo E. Older age, longer procedures and tandem endoscopic-ultrasound as risk factors for post-endoscopic retrograde cholangiopancreatography bacteremia. *World J Gastroenterol*. 2020 Nov 7;26(41):6402-6413.

2) The higher age of treated patients increased multi-morbidity and poli-therapy, with particular regards of anti-platelet and anti-coagulants agents. This argument, as well as post-ERCP bleeding and resume of therapy should be discussed by



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authors. See for instance: Paik WH, Lee SH, Ahn DW, Jeong JB, Kang JW, Son JH, Ryu JK, Kim YT. Optimal time of resuming anticoagulant after endoscopic sphincterotomy in patients at risk for thromboembolism: a retrospective cohort study. *Surg Endosc*. 2018 Sep;32(9):3902-3908. 3) At the same time Pediatric age is not covered among the treated arguments. Indeed, advances in endoscopy techniques led to a greater intervention rate in younger ages. A special section should also treat pancreas divisum and other abnormalities of pancreatic ducts. See for instance: Barakat MT, Cholanteril G, Gugig R, Berquist WE. Nationwide Evolution of Pediatric Endoscopic Retrograde Cholangiopancreatography Indications, Utilization, and Readmissions over Time. *J Pediatr*. 2020 Nov 14:S0022-3476(20)31396-2. doi: 10.1016/j.jpeds.2020.11.019. Epub ahead of print. PMID: 33197494.

RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Academic degree: MD, PhD

Professional title: Associate Professor

Reviewer's Country/Territory: Japan

Author's Country/Territory: United States

Manuscript submission date: 2021-01-27

Reviewer chosen by: Han Zhang (Part-Time Editor)

Reviewer accepted review: 2021-04-18 12:47

Reviewer performed review: 2021-04-20 05:41

Review time: 1 Day and 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
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

SPECIFIC COMMENTS TO AUTHORS

The authors replied reviewer's comments with courtesy in the revised version paper.