

## PEER-REVIEW REPORT

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

**Manuscript NO:** 61688

**Title:** Prospective evaluation of the hemorrhoid energy treatment for the management of bleeding internal hemorrhoids

**Reviewer's code:** 03478568

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Chief Doctor, Professor

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

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

**Manuscript submission date:** 2020-12-16

**Reviewer chosen by:** Ya-Juan Ma

**Reviewer accepted review:** 2021-01-28 06:59

**Reviewer performed review:** 2021-02-07 09:04

**Review time:** 10 Days and 2 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 Grade E: Do not publish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 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



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

the manuscript involves in a prospective study on the HET, a treatment technique's efficiency and safety in IH, with some clinical guiding significance. However, I have some concerns in details as below: 1. the word 'largest' is better to be removed or replaced by 'relatively large' 2.what is IRB? 3.the patients' information should be provided in more details, e.p the anticoagulants history, the hemorrhagic diseases,etc 4. Why choose the 3-months, but not longer time, e.p 6 or 12 months as the second time point for questionnaire? 5.What was done to avoid the telephone question' s bias? 6. The information of the HET operators should be described, as well as the operating time, which could exert impact on the prognosis. 7.The patients treated with modified HET should not be enrolled because of the different device. The author should provide more information to obtain the correct conclusion