



PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 66193

Title: A comparative study for predictability of type 1 gastric variceal rebleeding after endoscopic variceal ligation: a high-frequency intraluminal ultrasound study

Reviewer's code: 05220338

Position: Peer Reviewer

Academic degree: MD

Professional title: Chief Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: South Korea

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Reviewer chosen by: AI Technique

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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 Grade E: Do not publish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 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
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 type="checkbox"/> Yes <input checked="" 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



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SPECIFIC COMMENTS TO AUTHORS

Authors used HFIUS to detect varices and identify the predictability for rebleeding after EVL. This is an interesting topic. However, I want to point out two questions here to author. Firstly, HFIUS is a EUS without color doppler, which may be difficult to distinguish small cyst in fundus from varices sometimes. Secondly, the authors need to present the sessions of EVL, and whether variceal obliteration was obtained before 1 year follow-up. One session of EVL is difficult to result in variceal obliteration.