

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 66578

Title: Colonoscopy-related colonic ischemia

Reviewer's code: 00044980

Position: Editorial Board

Academic degree: MD

Professional title: Professor

Reviewer's Country/Territory: Japan

Author's Country/Territory: Italy

Manuscript submission date: 2021-03-30

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-04-01 16:21

Reviewer performed review: 2021-04-10 10:42

Review time: 8 Days and 18 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 Grade E: Do not publish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 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 type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" 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



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SPECIFIC COMMENTS TO AUTHORS

This manuscript is a review article of colonoscopy-related colonic ischemia. There are several novelties in this manuscript. However, I have some comments as follows, Major

1. Authors make a case presentation. However, I think that this case had colonic ischemia not due to colonoscopy but due to thrombosis of the several abdominal arteries.
2. Bowel preparation causes high pressure to intestinal lumen and cause colonic ischemia. Please mention it.
3. Authors mention that anesthesia could play a role in the multifactorial pathogenesis of colonic ischemia. However, the relation between colonic ischemia and anesthesia is not clear. Please refer the papers

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 66578

Title: Colonoscopy-related colonic ischemia

Reviewer's code: 05260701

Position: Peer Reviewer

Academic degree: MD

Professional title: Attending Doctor

Reviewer's Country/Territory: Belgium

Author's Country/Territory: Italy

Manuscript submission date: 2021-03-30

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-04-03 08:31

Reviewer performed review: 2021-04-11 11:01

Review time: 8 Days and 2 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 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 type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
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SPECIFIC COMMENTS TO AUTHORS

Dear Editor, Thank you for giving me the opportunity to review the manuscript entitled "Colonoscopy-related colonic ischemia" for your prestigious journal. In this well-conducted, structured review the authors present current evidence regarding the colonoscopy associated colonic ischemia. The authors should be commended for gathering and presenting in a clear and educative way the existing data about the potential pathogenetic mechanism that could lead to colonoscopy-associated ischemic colitis, its clinical presentation, management and prevention. Moreover, the authors added a summarizing table allowing the readership to easily follow their conclusions. I have only minor comments. 1. The clinical case presented in the beginning of the paper could actually be used as a springboard for the review, however a clear relation between colonoscopy and ischemic patients is difficult to be established in this particular multi-morbid patient. Thus, I would recommend the authors to tune down their diagnosis/ Instead, they could propose a potential relation with colonoscopy clearly mentioning the multifactoriality of this case. 2. The language needs further polishing. The paper is well written but further attention to syntax, typos and grammar should be paid.