

## PEER-REVIEW REPORT

**Name of journal:** Artificial Intelligence in Gastrointestinal Endoscopy

**Manuscript NO:** 68259

**Title:** Artificial Intelligence and Colonoscopy - Enhancements and Improvements

**Reviewer's code:** 05327699

**Position:** Peer Reviewer

**Academic degree:** MNAMS, MS

**Professional title:** Additional Professor

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

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

**Manuscript submission date:** 2021-06-05

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-06-07 04:18

**Reviewer performed review:** 2021-06-07 04:39

**Review time:** 1 Hour

<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 Grade E: Do not publish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 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 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**

Dear Author, 1. What is the future of Artificial-intelligence in Gastroenterology and how it can be simplified to be used by most of the Endoscopists/Gastroenterologists ? 2. How CADe system can be upgraded or improved for better sensitivity and specificity ? 3. How implication of Annotation - Tools in Artificial - Intelligence can be amalgamated to improve specificity rates in Gastroenterology ? 4. How false positive and false negative possibly effected low specificity in your review - article. Regards

## PEER-REVIEW REPORT

**Name of journal:** Artificial Intelligence in Gastrointestinal Endoscopy

**Manuscript NO:** 68259

**Title:** Artificial Intelligence and Colonoscopy - Enhancements and Improvements

**Reviewer's code:** 06076937

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

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

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

**Manuscript submission date:** 2021-06-05

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-06-08 02:43

**Reviewer performed review:** 2021-06-14 08:43

**Review time:** 6 Days and 5 Hours

<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 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



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

1.The idea of this paper is very clear and the research direction is very innovative. The author said in the article “Polyps are abnormal tissue growths that arise in the colon that carry malignant potential.Polyps are detected during colonoscopy but can sometimes be missed due to a variety of factors e.g. age of patient, diminutive polyp size, failure to reach cecum, quality of bowel preparation, and experience of endoscopist.”Therefore, AI has been applied to intestinal polyps and various intestinal inflammatory diseases. The addition of AI technology will increase the detection rate of intestinal diseases and improve the quality of life of patients. 2.The manuscript was concise and clear, and the style, language and grammar were accurate and appropriate. 3.With the introduction of AI technology mentioned in the article, the rate of diagnosis of diseases by clinicians has been improved, but after all, the sample cases are limited. When this technology is widely applied in clinical practice, can it also achieve such a good effect? 4.Because endoscopy ignores small polyps, the article mentions that AI technology will increase the detection rate of small polyps and identify the types of polyps. Can it cover all the types of polyps found in the intestine so far? Can AI achieve the goal of treatment in the future?