

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 68582

Title: Magnetic challenge against gastroesophageal reflux

Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03724996 Position: Peer Reviewer Academic degree: MD

Professional title: Surgeon

Reviewer's Country/Territory: Brazil

Author's Country/Territory: Italy

Manuscript submission date: 2021-05-27

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-05-27 17:05

Reviewer performed review: 2021-05-28 23:35

Review time: 1 Day and 6 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [Y] Minor revision [] Major revision [] Rejection
Re-review	[Y]Yes []No
Peer-reviewer	Peer-Review: [] Anonymous [Y] Onymous



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Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Congratulations to Bertolotti MD for this exciting manuscript. The author reviewed the magnetic devices for the treatment of gastroesophageal reflux. Overall, the study is well written. I have some minor suggestions. There are several sentences along with the manuscript with an excess of space. Ex: ""anastomoses" between", "power magnets", "in 2003, the article", "THE MAGNETIC **SPHINCTER** but AUGMENTATION DEVICE". Title: I would suggest the author point out that the manuscript is a narrative review. It could give more information to readers about the article. Introduction: Author state several sentences not supported by references. After any statement, a reference should be presented. Methods: The author did not show any information regarding methodology. Currently, there have been efforts to standardize review articles. The SANRA, a scale for the quality assessment of narrative review articles, was published in 2019. This scale suggests describing the methodology, and it also indicates that it is necessary to explain the search terms and point out the types of literature included. I hope it has been helpful.



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Reviewer's code: 05081500 Position: Peer Reviewer

Academic degree:

Professional title:

Reviewer's Country/Territory: Reviewer_Country

Author's Country/Territory: Italy

Manuscript submission date: 2021-05-27

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-05-27 21:57

Reviewer performed review: 2021-05-31 06:55

Review time: 3 Days and 8 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [] Grade B: Minor language polishing [Y] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [] Minor revision [Y] Major revision [] Rejection
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SPECIFIC COMMENTS TO AUTHORS

This is an interesting summary of the history and progress of MSA devices 1. My primary concern is the English. There are a lot of errors, both in content and context. There are too many for me to list here, but probably every paragraph contains something minor or major. In some sections the messages is lost in view of the english. 2. Much of the data citing different studies are described in sentences, one after the other. Sometimes it is difficult to follow as there are so many studies described and the message is lost. It would be helpful if these were summarised in tables with all the salient points listed (e.g. type of study, number of patients, testing methods, follow up period, results etc). Even better if these could be compared to similar studies for fundoplication 3. One of the major criticisms of Linx is that there are no RCTs. Probably a section regarding this would be helpful 4. MSA outcomes and adverse events changed when the sizing protocol was changed, there should be a description about this change of practice as there was a major reduction in adverse events thereafter (Ethicon quotes this all the time) 5. Pictures of the various devices being described should be included. Tables/graphs/images should be included. It is difficult to follow a paper that is just text



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Reviewer's code: 04025443

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Doctor, Senior Researcher

Reviewer's Country/Territory: Russia

Author's Country/Territory: Italy

Manuscript submission date: 2021-05-27

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-05-27 21:53

Reviewer performed review: 2021-06-04 16:30

Review time: 7 Days and 18 Hours

Scientific quality	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [] Grade B: Minor language polishing [Y] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [Y] Minor revision [] Major revision [] Rejection
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Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Dear professor Bortolotti! I read with pleasure and interest your manuscript "THE MAGNETIC CHALLENGE AGAINST GASTROESOPHAGEAL REFLUX" which is submitted as a frontier paper to the World Journal of Gastroenterology. It describes the procedure of magnetic esophageal sphincter augmentation: from the idea and implementation to clinical practice to current "shelved" state, with the hope to revitalization with the use of modern techniques. The matter you brought up, was not actively discussed recently. You ideas on further development, together with the data of new studies, make the subject of the paper actual and sounding. well-structured and is a real page-turner. I suppose, it would be interesting to the wide audience of readers: surgeons, endoscopists, gastroenterologists, general practitioners. I see no major flaws in regard to the paper content. Still, I would suggest to highlight achievements at each stage of your prominent career (at the Biography section). What is your opinion on the modulation of the efficacy of the method by the regulation (probably, on the distance) of the magnetic fields' strength (like how it's been implemented in pacemakers)? Please, make sure the syntax is correct throughout the paper, with special emphasis to abbreviations and words borrowed from the other languages (actually, I would suggest deep language polishing).



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Reviewer's code: 04068828 Position: Peer Reviewer Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Japan

Author's Country/Territory: Italy

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Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-05-28 02:34

Reviewer performed review: 2021-06-06 05:11

Review time: 9 Days and 2 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
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SPECIFIC COMMENTS TO AUTHORS

The author performed a literature review about the currently available magnetic devise for preventing gastroesophageal reflux, LINX, with regard to its efficacy and complications. Besides, he provided a perspective on the possibility of magnetic power as anti-reflux measure introducing other promising magnetic devices which currently not available. The manuscript is well written and it seems to be worthwhile being published in the journal. Major comments: Page 11. In terms of the statement "In most cases the removal of the device was done in two stages: first endoscopically for the visible beads, then laparoscopically for the remaining beads within 3 months after complete healing [48].", a case series of Asti et al. (Ann Surg. 2017 May;265(5):941-945.) should be discussed because they reported a single-stage procedure of MSA removal undergone in several cases. Minor comments: The manuscript needs to be corrected grammatically.