

PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 75909

Title: Clinical features and progress of ischemic gastritis with high fatalities: Seven case reports

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03262333

Position: Editorial Board

Academic degree: MD

Professional title: Professor

Reviewer's Country/Territory: Iran

Author's Country/Territory: Japan

Manuscript submission date: 2022-02-21

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-02-25 18:59

Reviewer performed review: 2022-02-25 19:29

Review time: 1 Hour

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" 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 Grade E: Do not publish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



**Baishideng
Publishing
Group**

7041 Koll Center Parkway, Suite
160, Pleasanton, CA 94566, USA
Telephone: +1-925-399-1568
E-mail: bpgoffice@wjgnet.com
https://www.wjgnet.com

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

The article has some merits but it is a very special case series of ischemic gastritis four of seven having recent surgery . The described clinical findings have no novelty . My suggestion is to highlight the findings of CT and its correlation with endoscopy both in title and in the text .

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Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05848410

Position: Peer Reviewer

Academic degree: Doctor, MMed, PhD

Professional title: Chief Doctor, Chief Physician, Dean, Doctor, Professor, Surgeon

Reviewer's Country/Territory: China

Author's Country/Territory: Japan

Manuscript submission date: 2022-02-21

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-02-22 03:12

Reviewer performed review: 2022-02-27 11:48

Review time: 5 Days and 8 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 type="checkbox"/> Grade B: Minor language polishing <input checked="" 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
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No
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SPECIFIC COMMENTS TO AUTHORS

The authors collected clinical data of patients diagnosed with ischemic gastritis in Shonan Kamakura General Hospital from April 2016 to September 2021. Through the retrospective study and analysis of the clinical and laboratory data, past medical history, endoscopy, CT results and treatment of 7 patients, the characteristic CT findings such as gastric wall thickening, mural emphysema and fluid retention were summarized, suggesting ischemic changes. To provide the basis for early clinical intervention. The topic of the paper is more in line with the reality, starting with solving the key clinical problems, the article has a certain clinical significance and use value. Although there are few cases of ischemic gastritis, there are also related research papers, whether this paper can broaden the train of thought and enrich the content of the article.

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Manuscript NO: 75909

Title: Clinical features and progress of ischemic gastritis with high fatalities: Seven case reports

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03258825

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Professor

Reviewer's Country/Territory: United States

Author's Country/Territory: Japan

Manuscript submission date: 2022-02-21

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-02-22 22:18

Reviewer performed review: 2022-03-06 21:39

Review time: 11 Days and 23 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" 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

Ischemic gastritis is a rare event (only 7 cases in 5 years in this series) due to highly abundant blood supply to the stomach. Ischemic gastritis thus reflects poor systemic circulation, which in turn predicts high mortality. Major comments: 1. The manuscript describes that their diagnosis of ischemic gastritis is by EGD findings; biopsies are not mentioned. Do all cases have biopsies to confirm ischemic gastritis? If the diagnosis is based on endoscopic findings only, we cannot be sure that these cases indeed had ischemic gastritis because EGD findings such as ulcers and edema are not specific to ischemic gastritis. All these cases are very sick patients, so the endoscopic findings may be due to stress ulcers or others, not necessarily ischemia. Pathology confirmation of the diagnosis is crucial. 2. The authors emphasized that early diagnosis of ischemic gastritis is difficult and CT findings are effective in diagnosis. However, CT findings are not sensitive nor specific either. 4 out of 7 cases had gastric wall thickening, which is not specific and can be caused by many different reasons, not necessarily ischemia. Mural emphysema is more specific but not sensitive enough because only 3 out of 7 cases had these findings. Minor comments: 1. What is the degree of hypotension that is associated with ischemic gastritis? SBP < 60 mmHg? 2. Under Discussion, the authors speculate that delayed gastric motility leads to increased intragastric pressure and ischemic gastritis. This is highly unlikely because even patients with severe gastroparesis do not develop ischemic gastritis. In addition, the 2 papers that the authors cited (reference 13 and 14) were both animal studies; thus it is not clear they are applicable to human.