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PEER-REVIEW REPORT

Name of journal: *World Journal of Gastroenterology*

Manuscript NO: 77554

Title: Robotic, self-propelled, self-steerable, and disposable colonoscopes: reality or pipe dream? A state of the art review

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 02823337
Position: Peer Reviewer
Academic degree: FRCS (Ed), FRCS (Gen Surg)
Professional title: Associate Professor, Chief Doctor, Surgeon
Reviewer's Country/Territory: China
Author's Country/Territory: United Kingdom

Manuscript submission date: 2022-05-06
Reviewer chosen by: AI Technique
Reviewer accepted review: 2022-05-06 11:18
Reviewer performed review: 2022-05-06 12:01
Review time: 1 Hour

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish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) [Y] Accept (General priority) [ ] Minor revision [ ] Major revision [ ] Rejection
Re-review	[ ] Yes [Y] No

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

SPECIFIC COMMENTS TO AUTHORS

This is a comprehensive review of evidence of robotic colonoscopy so far. The theoretical advantages of robotic colonoscopy was clearly discussed. However, it would be much better if a discussion on 'ideal' criteria for a robotic colonoscopy first before discussing varies types of currently available robotic colonoscopy. This will aid decision and discussion of usefulness of different kinds of robotic colonoscopies. On the other hand, as the issue of AI is not discussed in the manuscript, it's better to omit the term AI in core tip to avoid confusions from readers.

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Reviewer's code: 05461735
Position: Peer Reviewer
Academic degree: MD
Professional title: Doctor, Surgeon
Reviewer's Country/Territory: Thailand
Author's Country/Territory: United Kingdom

Manuscript submission date: 2022-05-06

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-05-24 21:25

Reviewer performed review: 2022-06-02 08:11

Review time: 8 Days and 10 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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Peer-reviewer statements	Peer-Review: [Y] Anonymous [ ] Onymous Conflicts-of-Interest: [ ] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

The authors reviewed the current status of the robotic, self-propelled, self-steerable colonoscope in this manuscript. Although the title is fascinating, and this is a good review, the evidence in the literature implies that the robotic colonoscope is very far from reality. However, it summarized what we are for robotic colonoscopy now. My comments for this manuscript are as follows. -Most endoscopists would not include capsule endoscopy in "robotic colonoscopy" because capsule endoscopy cannot perform therapeutic procedures (ex., polypectomy, biopsy). For this disadvantage, it is not fair to compare the procedural pain between standard colonoscopy with capsule colonoscopy.

-In the section "Potential benefits of robotic colonoscopy," the benefits to patients (less pain, less complication) and endoscopist (easier colonoscopy training, no need to learn about loop formation) are very far from reality. Nowadays, clinical endoscopists might not think robotic endoscopy could provide these benefits. Moreover, the competent endoscopist almost got a very high success rate of complete colonoscopy and rare complications. The learning curve only is about 100-400 cases, and most of the trainees could perform colonoscopy with standard quality. -The authors also mentioned robotic colonoscopy improves adenoma detection rate because of the integrated artificial intelligence (AI); however, standard colonoscopy could be integrated with AI nowadays. This might mislead this audience. -In my opinion, the section "Available alternatives to colonoscopy" is too redundant, especially in the last paragraph where the authors discussed about endocuff, FUSE. They are not alternatives to colonoscopy. They are adjunct devices to enhance standard colonoscopy. In summary, the authors did a hard work in this comprehensive review; however, the current evidence showed that the

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benefits of robotic colonoscopy are different between "what-they-think" and "what-they-are." Many companies no longer produce many robotic colonoscope systems because of limited real-life benefits. It might be a newly developed robotic colonoscope that provides real advantages to patients in the near future. For me, this review is worth to be published to make the audience know what we are right now.