



## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Gastroenterology*

**Manuscript NO:** 78044

**Title:** Dynamic blood presepsin levels are associated with severity and outcome of acute pancreatitis: A prospective cohort study

**Provenance and peer review:** Unsolicited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 03755068

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Consultant Physician-Scientist

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

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

**Manuscript submission date:** 2022-06-06

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-06-11 15:06

**Reviewer performed review:** 2022-06-12 08:07

**Review time:** 17 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 Grade E: Do not publish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 type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No



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<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**

I read with interest the paper by Dr. Xiao and coworkers on the predictive role of presepsin in patients with acute pancreatitis. The Authors prospectively collected 133 patients who were admitted with diagnosis of acute pancreatitis, and measured plasma levels of presepsin up to day 7. They demonstrated a correlation between presepsin levels and degree of acute pancreatitis, highlighting the role of presepsin as biomarker of inflammation. Moreover, patients with severe AP showed a lower clearance of presepsin at day 7. The paper is quite interesting, although the topic is not a novelty. Furthermore, there are many pitfalls that the Authors acknowledged in the Discussion section (mainly, the influence of renal dysfunction on presepsin levels; the comparison of a serum biomarker with clinical scores but not with other biomarkers of inflammation, as CRP or PCT). My comments - I think that a brief comment about the sample size should be added. Indeed, statistical analysis may have been influenced by the low number of patients who died (n. 7), and of patients who had a severe pancreatitis (n. 17) - What were the organs who failed? - How many infection (e.g., cholangitis) occurred? - What could be the role of presepsin in the clinical setting? Would it useful to rule out severe or moderate AP in the first days, allowing a rapid discharge? Indeed, a low PSP value at day 3 or day 5 may be of help more in identifying mild vs non mild disease than moderate vs severe. A comment would be of interest. - Are there other studies that investigated the role of PSP in patients with AP? If yes, were the PSP values comparable between studies?



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**Peer-review model:** Single blind

**Reviewer's code:** 04092118

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Postdoc, Senior Lecturer

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

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

**Manuscript submission date:** 2022-06-06

**Reviewer chosen by:** AI Technique

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**Reviewer performed review:** 2022-06-19 18:17

**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 type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No



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<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**

I've read with great interest the manuscript "Dynamic blood presepsin levels is associated with severity and outcome of acute pancreatitis: a prospective cohort study". The authors approach an important issue in the management of acute pancreatitis - biomarkers that predict the severity of acute pancreatitis (AP) in the early phase. Regarding patient characteristics, the distribution of etiology of AP is odd (alcohol only 3%), but maybe typical for the Asian population. This should be discussed, as we know that some forms of AP are associated with higher severity. The results and dynamics of presepsin are quite intuitive. In order to increase the value of the paper, a correlation with other markers would be recommended, particularly with similar biomarkers such as procalcitonin. Also, regarding the association of presepsin clearance and AP severity - this might be explained by the renal failure in severe AP. Overall a good paper but more correlations with other biomarkers used for risk stratification would be warranted.



## RE-REVIEW REPORT OF REVISED MANUSCRIPT

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**Peer-review model:** Single blind

**Reviewer's code:** 03755068

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Consultant Physician-Scientist

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

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

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**Reviewer chosen by:** Han Zhang

**Reviewer accepted review:** 2022-07-27 18:05

**Reviewer performed review:** 2022-07-27 18:08

**Review time:** 1 Hour

<b>Scientific quality</b>	<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
<b>Language quality</b>	<input checked="" type="checkbox"/> Grade A: Priority publishing <input 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 checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Peer-reviewer</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous



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

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

the authors answered my previous comments no further action