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PEER-REVIEW REPORT

Name of journal: *World Journal of Gastrointestinal Endoscopy*

Manuscript NO: 88543

Title: The role of computed tomography for the prediction of esophageal variceal bleeding: Current status and future perspectives The role of computed tomography for the prediction of esophageal variceal bleeding: Current status and future perspectives

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03024207
Position: Editorial Board
Academic degree: MD, PhD
Professional title: Chief Doctor, Full Professor
Reviewer's Country/Territory: China
Author's Country/Territory: Italy

Manuscript submission date: 2023-09-27

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-09-30 15:46

Reviewer performed review: 2023-10-09 14:42

Review time: 8 Days and 22 Hours

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Novelty of this manuscript	[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No novelty

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Creativity or innovation of this manuscript	[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No creativity or innovation
Scientific significance of the conclusion in this manuscript	[ ] Grade A: Excellent [ ] Grade B: Good [Y] Grade C: Fair [ ] Grade D: No scientific significance
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 statements	Peer-Review: [Y] Anonymous [ ] Onymous
	Conflicts-of-Interest: [ ] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Hepatic venous pressure gradient and esophagogastroduodenoscopy are currently recognized as the "gold standard" and the diagnostic reference standard for the prediction of EVB, respectively. This review addresses the shortcomings of current prophylactic measures such as invasiveness and high cost, and proposes that non-invasive and cost-effective CT examination has great promise in preventing the first bleeding in EV patients. The authors' ability to identify problems in the clinic and to analyze the related fields with meticulous research is worthy of recognition. There are also some problems with this paper as follows: 1. The first occurrence of a specialized term needs to be given the full name, e.g. MDCT in the abstract 2. It would be useful to give an analysis of the results of relevant studies. For example previous studies have been inconsistent in their conclusions about the coronary vein and spleno-renal shunt predicting bleeding in patients with EV, what might be the reason for this difference?

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Liver function scores were inconsistent across subgroups, how much might this have affected the study results? 3. Is it possible to give an outlook on future research in the discussion? For example, in the concluding part, the authors acknowledge that CT cannot completely replace endoscopy at this time, so could future studies move from examining CT alone to predict outcome events to CT parameters assisting endoscopy to further improve prediction of the occurrence of outcome events? Overall, the authors provide an adequate analysis of previous research, but it is necessary to summarize and present their own ideas.

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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: Italy

Manuscript submission date: 2023-09-27

Reviewer chosen by: Yu-Lu Chen

Reviewer accepted review: 2023-10-24 15:59

Reviewer performed review: 2023-10-29 20:31

Review time: 5 Days and 4 Hours

Scientific quality	[ ] Grade A: Excellent [Y] Grade B: Very good [ ] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Novelty of this manuscript	[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No novelty

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

SPECIFIC COMMENTS TO AUTHORS

This is a well-written review on the current status of using CT in predicting esophageal variceal bleeding in liver cirrhosis patients. So far there are only 9 studies on this topic and the authors summarized those studies succinctly in the manuscript and with tables. Comments: 1. Given that EGD and HVPG are currently the gold standards, it would be better if authors provide some perspectives on how well EGD and HVPG are on predicting EVB based on prior literature. Although there is no prospective head-to-head comparison, discussion of prior historical data of EGD and HVPG remains helpful in assessing the potential of CT in this area. 2. The tone of the manuscript seems to promote CT as a preferred method for EV screening and EVB prediction. In reality, since CT is only a diagnostic test, it cannot supplant EGD or HVPG in providing therapy and physiological data. It is more likely that clinical parameters, EGD, HVPG, and CT all together in combination are better than any single modality alone. Although the authors

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touched upon this in a paragraph of Conclusion, it would be best if the authors soften the tone a little bit more in the manuscript; for example, in the Introduction and Conclusion.