

## PEER-REVIEW REPORT

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

**Manuscript NO:** 89424

**Title:** Endoscopic intramural cyst-gastrostomy for the treatment of peripancreatic fluid collection: A viewpoint from a surgeon

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

**Peer-review model:** Single blind

**Reviewer's code:** 03656594

**Position:** Editorial Board

**Academic degree:** DA, MD, PhD

**Professional title:** Professor

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

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

**Manuscript submission date:** 2023-10-31

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2023-11-15 03:02

**Reviewer performed review:** 2023-11-15 03:45

**Review time:** 1 Hour

Scientific quality	<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 Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation

<b>Scientific significance of the conclusion in this manuscript</b>	<input checked="" type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
<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 checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<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

## SPECIFIC COMMENTS TO AUTHORS

This article describes the current therapeutic approaches for the treatment of pancreatic pseudocysts with mature cystic walls, in particular endoscopic transgastric fenestration (ETGF) and EUS-guided drainage and necrosectomy in detail. These two approaches have the advantage of being less invasive and less costly than surgical cyst-gastrostomy and have comparable drainage outcomes. The authors also summarized the comparison of these treatment modalities in a table, which is more intuitive. This article introduces more options for the clinical management of patients with acute pancreatitis, especially ETGF, which is a promising research direction and can promote the cooperation and progress between gastroenterology and general surgery. This editorial is excellent, visually providing a comparison of different surgical procedures that will entice readers to read the issue.

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**Peer-review model:** Single blind

**Reviewer's code:** 00070310

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Doctor

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

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

**Manuscript submission date:** 2023-10-31

**Reviewer chosen by:** Jia-Ru Fan

**Reviewer accepted review:** 2023-11-21 05:41

**Reviewer performed review:** 2023-11-27 00:41

**Review time:** 5 Days and 18 Hours

Scientific quality	<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
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation

<b>Scientific significance of the conclusion in this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
<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 checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<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

#### SPECIFIC COMMENTS TO AUTHORS

This editorial is well written and acceptable

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**Peer-review model:** Single blind

**Reviewer's code:** 03699975

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

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

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

**Manuscript submission date:** 2023-10-31

**Reviewer chosen by:** Jia-Ru Fan

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**Reviewer performed review:** 2023-11-28 15:35

**Review time:** 1 Day and 7 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
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation

<b>Scientific significance of the conclusion in this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
<b>Language quality</b>	<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
<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
<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

## SPECIFIC COMMENTS TO AUTHORS

**General comments** The author has made a considerable effort to present an Editorial Article of this very interesting topic, by attempting to highlight treatment options for peri-pancreatic fluid collections from a surgeon's perspective. Although the study is of clinical interest it does not meet the criteria for an Editorial Article, and it is not prepared according to the Guidelines of the journal. The manuscript is not written by using 12 pt Book Antiqua font and 1.5 line spacing with ample margins. The Title page does not provide the information needed. The references are not cited correctly. In the Cover letter the author states that this is an invited Editorial article, concerning comments on the article Endoscopic transgastric fenestration versus percutaneous drainage for management of (peri)pancreatic fluid collections adjacent to gastric wall (with video), Zhang HM et al. World Journal of Gastroenterology 2023; in press Manuscript No.: 87047. Therefore, I think there should be a reference to this article in the present manuscript. Furthermore, the manuscript has severe language issues that require major grammar and linguistic revision in order to meet the quality of English expected for a scientific publication.

**Specific comments** I have tried to correct some indicative points



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below: The sentence on line 6 In case, percutaneous or endoscopic intervention for these local complications should wait until the well-encapsulated formation such as PPC or WON should be rewritten as following In case, percutaneous or endoscopic intervention for these local complications is necessary, it should wait until the well-encapsulated formation is achieved such as PPC or WON. The two last sentences in the second paragraph The bleeding during the management with endoscopic necrosectomy for ANC or WON might occur and result into a disaster complication. Therefore, it is better to perform at referral centers with surgical backup should be better expressed, perhaps like following Bleeding during the management with endoscopic necrosectomy for ANC or WON might occur and result into a catastrophic complication. Therefore, it is better performed in referral centers with surgical backup. Explanation of initials for ETGF should be provided when they first appear, explanation should also be provided for PPFC. On line 4 of the third paragraph the sentence From a viewpoint of surgeon, ETGF has similarly procedures of cyst-gastrostomy for producing a wide outlet-orifice for drainage of fluid and necrotic debris between the cyst and stomach is not very clear, it needs to be rewritten. The last sentence in the third paragraph Technically, the operator used EUS-guide first to demonstrate presumably resection line on gastric wall at the site of maximal prominence of the PPC into the stomach to select the thinnest wall and thus minimize adverse events should be rewritten, possibly as following Technically, the operator should use EUS-guidance at first to demonstrate presumably resection line on gastric wall at the site of maximal prominence of the PPC into the stomach and then select the thinnest wall, thus minimizing adverse events. On the first line of the fourth paragraph the word endoscope should be replaced by the word endoscopy. The sentence on line 5 of the fourth paragraph Probability of the post-procedure complications and outcomes were different and their comparisons were listed in the table 1 should be rewritten possibly as following Probability of



post-procedural complications and outcomes differ between the various techniques and comparisons are listed in table 1. The next sentence Varadarajulu et al. performed a retrospective study including compared patients with uncomplicated.... must be written as follows Varadarajulu et al. performed a retrospective study comparing patients with uncomplicated.....



## RE-REVIEW REPORT OF REVISED MANUSCRIPT

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**Reviewer's code:** 03699975

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

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

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

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**Reviewer chosen by:** Xin-Liang Qu

**Reviewer accepted review:** 2023-12-12 08:23

**Reviewer performed review:** 2023-12-14 20:30

**Review time:** 2 Days and 12 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 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 checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Peer-reviewer	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous

**statements**

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

**SPECIFIC COMMENTS TO AUTHORS**

**General comments** The author has addressed issues raised in the initial review, but it should be noted that comments of the other reviewers are not provided to me, therefore I could not know if the author has addressed all issues pointed out. In the document titled Answering Reviewers-revision the author declares that the sentences in the text have been corrected with red color based on the suggestions made, but it does not appear so (no red color). Although difficult to correlate, they seem to have addressed all issues. They have also dealt with abbreviations. After the Editors Remark, the manuscript has been suggested to change to a Letter to the Editor which better expresses the style of the study. The severe linguistic issues (style, language, and grammar) have been addressed and revised, bringing the manuscript to the quality of English expected for a scientific publication. Finally, the author claims that after the Editors Remark, the table has been moved to the end of the manuscript, unfortunately no table exists in the uploaded manuscript.

**Specific comments** In Abstract line 4 Varadarajulu S should be written as Varadarajulu et al. The same appears in Core tip and main text (3rd line on the third paragraph). In Abstract line 8 the abbreviation wk is used for the word weeks. In the last sentence of the first paragraph in the main text the word weeks is used. I think that the word must be expressed in the same manner throughout the manuscript. In the sentence If percutaneous or endoscopic interventions for these local complications are necessary, it is necessary to wait until well-encapsulated formation, such as PPC or WON, is achieved the word necessary is repeated twice, better change one to an alternate word. In the third paragraph after the second sentence a reference is needed for Varadarajulu et al.