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PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Surgery

Manuscript NO: 91131

Title: MH-STRALP: A scoring system for prognostication in patients with upper

gastrointestinal bleeding

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 00068348

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Surgeon

Reviewer's Country/Territory: Greece

Author's Country/Territory: China

Manuscript submission date: 2023-12-22

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-12-30 06:34

Reviewer performed review: 2024-01-07 11:55

Review time: 8 Days and 5 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Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish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
Creativity or innovation of this manuscript	[] Grade A: Excellent [Y] Grade B: Good [] Grade C: Fair [] Grade D: No creativity or innovation



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Scientific significance of the conclusion in this manuscript	[] Grade A: Excellent [Y] Grade B: Good [] 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) [Y] Accept (General priority) [] 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

The authors deal with a very interesting issue regarding a scoring system for prediction of gastrointestinal bleeding. The whole set up of the study is well structured. All the parts of the article correspond to the main subject. They are descriptive both in article and in tables including a large number of parameters. What is really of interest is that comparing with the other scoring systems both MH-STRALP and pre-MH-STRALP are superior. My opinion is that is obligatory and of benefit for the patient to try for endoscopic control of the bleeding second and third time if the patient will bleed after the primary endoscopic trila. A contraindication of endoscpy is a rare issue.