

## PEER-REVIEW REPORT

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

**Manuscript NO:** 46828

**Title:** Recent advances in endoscopic retrograde cholangiopancreatography in Billroth II gastrectomy patients: A systematic review

**Reviewer's code:** 02542970

**Reviewer's country:** China

**Science editor:** Jia-Ping Yan

**Reviewer accepted review:** 2019-03-01 12:59

**Reviewer performed review:** 2019-03-01 13:08

**Review time:** 1 Hour

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input checked="" type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input checked="" type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input checked="" type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

### SPECIFIC COMMENTS TO AUTHORS

this paper reviewed recent advances in ERCP in Billroth II gastrectomy patients with enough data, it could bring new information for clinic.



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#### INITIAL REVIEW OF THE MANUSCRIPT

##### *Google Search:*

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

##### *BPG Search:*

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

## PEER-REVIEW REPORT

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

**Manuscript NO:** 46828

**Title:** Recent advances in endoscopic retrograde cholangiopancreatography in Billroth II gastrectomy patients: A systematic review

**Reviewer's code:** 03646569

**Reviewer's country:** Bulgaria

**Science editor:** Jia-Ping Yan

**Reviewer accepted review:** 2019-03-17 19:37

**Reviewer performed review:** 2019-03-24 10:31

**Review time:** 6 Days and 14 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input checked="" type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	<input checked="" type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

## SPECIFIC COMMENTS TO AUTHORS

The systematic review by Park et al provides detailed information about all available endoscopic approaches for ERCP in Bilroth II gastrectomy patients. The purpose is to systematically review the available literature regarding this topic including the



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advantages, success rates and adverse events of different endoscopic techniques. ERCP in BII patients remains a challenging procedure despite the advances in the endoscopic therapy and still not all the problems are solved.- this was also discussed by the authors. The article provides useful information about the current status and highlights the need for further development in the area.

#### **INITIAL REVIEW OF THE MANUSCRIPT**

##### ***Google Search:***

- ☐ The same title
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- ☐ No

##### ***BPG Search:***

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- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

## PEER-REVIEW REPORT

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

**Manuscript NO:** 46828

**Title:** Recent advances in endoscopic retrograde cholangiopancreatography in Billroth II gastrectomy patients: A systematic review

**Reviewer's code:** 01467632

**Reviewer's country:** Italy

**Science editor:** Jia-Ping Yan

**Reviewer accepted review:** 2019-03-22 11:01

**Reviewer performed review:** 2019-03-26 08:47

**Review time:** 3 Days and 21 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input checked="" type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

## SPECIFIC COMMENTS TO AUTHORS

Park and Song conducted a comprehensive systematic review on ERCP performed on BII patients, evaluating the possible scopes that can be used and evaluating rate of afferent loop intubation and biliary cannulation and complications based on the scope.



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Three electronic databases were searched and 43 studies finally analyzed for a total of 2669 patients included. The review is methodologically well performed, well written and interesting in content. The discussion is well written and interesting for the reader and raises the need of further studies to be performed. I suggest the article to be published in this form as, in my opinion, there are no revisions to be made.

#### **INITIAL REVIEW OF THE MANUSCRIPT**

##### ***Google Search:***

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- ☐ Plagiarism
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##### ***BPG Search:***

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- ☐ Duplicate publication
- ☐ Plagiarism
- ☒ No

## PEER-REVIEW REPORT

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

**Manuscript NO:** 46828

**Title:** Recent advances in endoscopic retrograde cholangiopancreatography in Billroth II gastrectomy patients: A systematic review

**Reviewer's code:** 03475260

**Reviewer's country:** Italy

**Science editor:** Jia-Ping Yan

**Reviewer accepted review:** 2019-03-18 14:11

**Reviewer performed review:** 2019-03-26 09:31

**Review time:** 7 Days and 19 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input checked="" type="checkbox"/> Major revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

### SPECIFIC COMMENTS TO AUTHORS

In this systematic review, Park and Song aimed to analyze the available evidence on ERCP in patients with Billroth II gastrectomy. The final analysis included 43 studies and 2669 patients, and reported data about successful afferent loop intubation, successful



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cannulation of the desired duct and adverse events, as well as information about the endoscope used and sphincter management methods. This is an interesting review on an important topic, nevertheless several points need to be further discussed to allow a correct interpretation of the data. Major points: - In the abstract conclusion, the Authors stated that “The performance of ERCP in the Billroth II gastrectomy population has been improving with the advent of novel endoscopic instruments and advanced techniques”. However, in the manuscript it is not clearly described a trend toward a better outcome with novel technologies. Moreover, despite the title of the manuscript, the “recent advances” in this field have not been sufficiently detailed. These points should be further discussed. - Despite this work aims to analyzed Billroth II patients, the Authors included several cases of different surgical altered anatomy (Pancreaticoduodenectomy, Roux-en-Y gastrectomy, Hepaticojejunostomy with Roux-en-Y, as reported in table 1 and table 2). This should be clearly explained in the title, abstract and manuscript, as different surgical reconstructions may have different outcome in ERCP. Alternatively, these cases should be excluded from the analysis. - Since different indications for ERCP may have different outcome in terms of cannulation rate or adverse events (e.g. malignant stenosis vs bile duct stones), data about ERCP indication, if available, should be provided, or, alternatively, the Authors should comment this aspect. - The Authors reported afferent loop intubation rate and cannulation rate. Are data about procedure clinical success (e.g. stones clearance, successful stent placement) available? - The Authors reported a graphic representation of different Billroth II reconstructions after gastrectomy. If data about difference of ERCP outcome between different surgical reconstructions are not known or not available, consider to remove the figure, as potentially confounding. - The Authors reported a “Subgroup analysis according to the sphincter management methods”. Sphincter management is supposed to affect clinical efficacy of the procedure rather than





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cannulation rate or afferent loop intubation rate. Please expand these findings reporting clinical outcome according to this subgroup analysis. - Please provide more details about the use and the potential advantages of dual lumen endoscope in this setting. Minor revisions: - In the manuscript there are some typing errors (e.g. in the text of fig. 4). Please revise the manuscript and amend the errors.

#### **INITIAL REVIEW OF THE MANUSCRIPT**

##### ***Google Search:***

- ☐ The same title
- ☐ Duplicate publication
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##### ***BPG Search:***

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## PEER-REVIEW REPORT

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

**Manuscript NO:** 46828

**Title:** Recent advances in endoscopic retrograde cholangiopancreatography in Billroth II gastrectomy patients: A systematic review

**Reviewer's code:** 03271124

**Reviewer's country:** Thailand

**Science editor:** Jia-Ping Yan

**Reviewer accepted review:** 2019-03-18 02:21

**Reviewer performed review:** 2019-03-28 01:26

**Review time:** 9 Days and 23 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input checked="" type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input checked="" type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

## SPECIFIC COMMENTS TO AUTHORS

Dear author, The manuscript entitled "Recent advances in ERCP in Billroth II gastrectomy patients: A systematic review" is well written. Comments, 1. The previous studies included in this systematic review are relatively wide range (from 1984-2018)



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and only three studies were published in recent years. This would be the limitation of this study. Because of there are the difference of the endoscopic instruments and skill of the endoscopist between the past and the present.

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##### ***BPG Search:***

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