

## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Clinical Cases*

**Manuscript NO:** 70842

**Title:** Therapeutic endoscopy of a Dieulafoy lesion in a 10-year-old girl: A case report

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

**Peer-review model:** Single blind

**Reviewer's code:** 05928732

**Position:** Peer Reviewer

**Academic degree:** MD, PhD

**Professional title:** Doctor

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

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

**Manuscript submission date:** 2021-08-16

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-08-17 02:36

**Reviewer performed review:** 2021-08-17 06:00

**Review time:** 3 Hours

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" 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 Grade E: Do not publish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 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</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous

statements

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

## SPECIFIC COMMENTS TO AUTHORS

The authors report a rare case of a Dieulafoy lesion in a ten years old female. The interesting point of this case is that Dieulafoy lesion was found in a child, though the occurrence in adults is common. If the authors can mention the points that they paid particular attention in the diagnosis and treatment in this child case, it is worth sharing worldwide. In addition, there are the following concerns. Major comments #1 The authors describe that a 10-year-old Chinese girl with a history of hematemesis was admitted. The information about “when” and “how often” need to be clarified. #2 In case description, as the description about present history, past history, family history and physical information are mixed, it is hard to follow for readers. #3 About laboratory data, “urea” is not common. “Blood urea nitrogen (BUN)” is familiar for all. In addition, the high level of BUN is very important signal for upper intestine bleeding as this case. #4 The authors describe that abdominal enhanced computed tomography did not show any special abnormality, however, the findings that the stomach is full and there is the density difference of the contains should be never overlooked. #5 The procedure of this case is questioned. The authors need to describe that the reason why the patient with hematemesis and melena was performed the gastric lavage, which is a risk factor for inducing re-hematemesis and not generally recommended. The evidences and the reasons for each procedure need to be considered and described rather than the usual endoscopic explanation with no novelty. Minor comments #1 It is better that the laboratory data is organized in a table for readers.

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**Peer-review model:** Single blind

**Reviewer's code:** 05119548

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Professor

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

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

**Manuscript submission date:** 2021-08-16

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-08-17 10:45

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**Review time:** 13 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 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>Re-review</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Peer-reviewer</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous



**Baishideng  
Publishing  
Group**

7041 Koll Center Parkway, Suite  
160, Pleasanton, CA 94566, USA  
**Telephone:** +1-925-399-1568  
**E-mail:** bpgoffice@wjgnet.com  
<https://www.wjgnet.com>

statements

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

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

This manuscript has the original findings. But it should be described how rare is DL in children, even though the treatment for DL is same as in adults. There are no literature review of DL in children. The authors should describe this issue in Introduction or Discussion part.

## RE-REVIEW REPORT OF REVISED MANUSCRIPT

**Name of journal:** *World Journal of Clinical Cases*

**Manuscript NO:** 70842

**Title:** Therapeutic Endoscopy of a Dieulafoy Lesion in a Ten-Year-Old Female and a Review of the Literature

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

**Peer-review model:** Single blind

**Reviewer's code:** 05928732

**Position:** Peer Reviewer

**Academic degree:** MD, PhD

**Professional title:** Doctor

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

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

**Manuscript submission date:** 2021-08-16

**Reviewer chosen by:** Yun-Xiaojuan Wu

**Reviewer accepted review:** 2021-11-25 01:03

**Reviewer performed review:** 2021-11-25 09:42

**Review time:** 8 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

The manuscript is significantly improved. However, there are some concerns yet as follows; #5 The procedure of this case is questioned. The authors need to describe that the reason why the patient with hematemesis and melena was performed the gastric lavage, which is a risk factor for inducing re-hematemesis and not generally recommended. The evidences and the reasons for each procedure need to be considered and described rather than the usual endoscopic explanation with no novelty. Response: According to the "Standardize the diagnosis and treatment of acute non-variceal upper gastrointestinal bleeding based on the update guidelines, Chinese Journal of Internal Medicine, 2019, 58(3):161-163", 1:10000 noradrenaline and ice saline can be used for endoscopic hemostasis. #The problem is that the guidelines differ from country to country, and it is the mission of World Journal of Clinical Cases to share them around the world. It is necessary to state that authors are treating with this case according to the guideline of their own country. # Arrows make it easier for the readers to understand the clots in CT. # Fig.2 is unclear and hard to see. # The letters in the table need to be aligned.