

PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 71361

Title: Triple A syndrome related achalasia treated by per-oral endoscopic myotomy:
Three case reports

Provenance and peer review: Unsolicited manuscript; externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03017080

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: United States

Author's Country/Territory: China

Manuscript submission date: 2021-10-06

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-10-08 18:16

Reviewer performed review: 2021-10-13 14:43

Review time: 4 Days and 20 Hours

Scientific quality	<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 Grade E: Do not publish
Language quality	<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
Conclusion	<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
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**Peer-reviewer
statements**

Peer-Review: [☒] Anonymous [☐] Onymous

Conflicts-of-Interest: [☐] Yes [☒] No

SPECIFIC COMMENTS TO AUTHORS

The authors are commended about the case series of a rare syndrome that is a known cause of hereditary achalasia. I acknowledge the challenges faced by non-native English speakers when it comes to publishing and the need for editing assistance. It is obvious however that the editor/translator is not a medical expert and a few translations are erroneous. For example when trying to describe the manometric findings, there is mention of "esophageal compression" instead of "pressurization" and in several instances "dysphasia" is used instead of "dysphagia". In addition there are typos where Eckardt is misspelled and the grammar can be fixed. It would have been helpful to mention at least somewhere that the syndrome is also known as Allgrove and that autonomic disturbance can be part of it (making it 4 "A"). Allgrove syndrome is still considered primary achalasia and not secondary achalasia as the article mentions. Secondary achalasia is mainly due to Chaga's disease or malignancy. This then takes away the claim this article makes that "POEM is recommended as a treatment for secondary achalasia". The article also grades ES as "approximately zero". I'm not sure what it is meant by approximately as ES is an integer number and the score is either zero or not. I would be cautious in making generalization based on a case series of 3 patients that were followed for 2 years. The conclusion used (...POEM is not the end of a cure... it is promising starting point for chronic disease management) is very general and very vague and as such is inaccurate. Achalasia has treatments (and no cure) as it tends to recur.

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Reviewer's code: 04022632

Position: Peer Reviewer

Academic degree: MD

Professional title: Assistant Professor, Doctor, Staff Physician

Reviewer's Country/Territory: United States

Author's Country/Territory: China

Manuscript submission date: 2021-10-06

Reviewer chosen by: AI Technique

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Reviewer performed review: 2021-10-23 13:16

Review time: 1 Day and 19 Hours

Scientific quality	<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
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
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Peer-reviewer statements	Peer-Review: [<input checked="" type="radio"/>] Anonymous [<input type="radio"/>] Onymous Conflicts-of-Interest: [<input type="radio"/>] Yes [<input checked="" type="radio"/>] No
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SPECIFIC COMMENTS TO AUTHORS

Thank you for sharing your experience using POEM for management of secondary achalasia related to triple A syndrome. The case series is small but well written except minor grammatical error and misspelling. Follow up ranges from 12 to 24 months and limited to clinical symptoms using the Eckardt score. One of the patient had worsening symptoms after 24 months. Do you know why the achalasia pattern varies between patients (Type II vs Type III) despite having he same disease process.

RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Academic degree: MD

Professional title: Assistant Professor, Doctor, Staff Physician

Reviewer's Country/Territory: United States

Author's Country/Territory: China

Manuscript submission date: 2021-10-06

Reviewer chosen by: Ji-Hong Liu

Reviewer accepted review: 2021-12-29 16:49

Reviewer performed review: 2021-12-29 17:27

Review time: 1 Hour

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

Thank you for revising the manuscript and clarifying the difference between primary achlasia and secondary achalsia related to triple A syndrome and providing a follow up for the 3rd patient. I am not sure if the conclusion of the study (in the abstract section) is that POEM is recommended for treatment of achlasia secondary to triple A syndrome. I think it may be more appropriate to state that POEM is "efficacious and safe" for treatment of achlasia secondary to triple A syndrome OR adjust it to the conclusion listed in the actual manuscript. I also noticed minor grammatical issues that may need to be corrected prior to submission. I also noticed that there is a table associated with the submission but was not cited anywhere in the manuscript.