

PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

Manuscript NO: 34175

Title: Endoscopic ultrasound: current roles and future directions

Reviewer's code: 02441070

Reviewer's country: China

Science editor: Fang-Fang Ji

Date sent for review: 2017-04-10

Date reviewed: 2017-04-10

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input checked="" type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> No	<input type="checkbox"/> Minor revision
		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input type="checkbox"/> No	

COMMENTS TO AUTHORS

this paper reviewed endoscopic ultrasound: current roles and future directions in detail. you should check the spell, such as "lasting results 7 22" in the paper.

- *We have revised the "lasting results 7 22" sentence.*

PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

Manuscript NO: 34175

Title: Endoscopic ultrasound: current roles and future directions

Reviewer's code: 01587889

Reviewer's country: United States

Science editor: Fang-Fang Ji

Date sent for review: 2017-04-10

Date reviewed: 2017-04-18

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> [Y] Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input type="checkbox"/> No	

COMMENTS TO AUTHORS

This is a review manuscript from Drs Friedberg and Lachter entitled "endoscopic ultrasound [EUS]: current roles and future directions". The authors provide a monumental information regarding EUS and its associated advancements that have begun to take advantage of the fact that the gastrointestinal tract runs medially throughout the majority of the body and is very accessible; the gastrointestinal tract is now beginning to be used as an inlet to the rest of the body. The authors further deploy that after having brought ultrasound technology inside the gastrointestinal tract three decades ago, EUS is now being used as a guide outside the gut lumen. However, they confess that many of these recent technologic advancements are in early stages and not yet studied extensively. It is anticipated the years ahead are expected to be bright for endoscopic ultrasound, as these various technologies begin to be implemented into clinical practice. The story is attractive and informative. The content and references correspond well and are adequately presented. The language is acceptable.

PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

Manuscript NO: 34175

Title: Endoscopic ultrasound: current roles and future directions

Reviewer's code: 01469554

Reviewer's country: Japan

Science editor: Fang-Fang Ji

Date sent for review: 2017-04-10

Date reviewed: 2017-04-18

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input type="checkbox"/> No	

COMMENTS TO AUTHORS

I read this paper with great interest. It is a well written paper. This review is informative to many endoscopist. I think acceptable to World Journal of Gastrointestinal Endoscopy.

PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

Manuscript NO: 34175

Title: Endoscopic ultrasound: current roles and future directions

Reviewer's code: 03476021

Reviewer's country: Italy

Science editor: Fang-Fang Ji

Date sent for review: 2017-04-10

Date reviewed: 2017-05-01

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No	<input checked="" type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input type="checkbox"/> No	

COMMENTS TO AUTHORS

The paper represents a review on the role of echoendoscopy in the diagnosis and treatment of several gastroenterological condition. The paper is nicely written and of relevance however few point should be addressed. - I suggest to discuss the role of eus in diagnosis before the operative (e.g drainage) session. - Pacreatic fluid collection: "SEMS is most useful in relatively new tool" require proper reference. - Pancreatic duct session: last session "In the future. media reactions" require a reference - Biliary section: "It is argued...costs of therapy" require proper reference. - Characterization of the lesions: the authors stated that "EUS guidance improves sensitivity, specificity, and safety while obtaining these tissue sampling", which is the techniques of comparison? - Small bowel abdominal ultrasound with elastography has been widely studied in the setting of IBD, however the impact of EUS elastography in IBD is less clear; I suggest to not mention IBD. - Forward viewing endoscopic ultrasound technique should be described more in detail.



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- *We have adjusted the article accordingly, that is, to begin with diagnosis first, followed by therapeutic roles.*
- *We have added proper references for the sentences that we kept.*
- *In regards to the techniques of comparison, we deleted the sentence due to lack of appropriate reference.*
- *We deleted the IBD reference as recommended.*
- *We added more information about the forward viewing EUS technique.*