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CHECKLIST OF RESPONSIBILITIES FOR SCIENTIFIC EDITORS

Manuscript page number: 33

Manuscript word count: 7540

		Comments
Item No.	Specific items for verification	Yes=[Y]
		No= [N]
	General Information of the Manuscript	
	Name of journal: World Journal of Gastroenterology	
	Manuscript NO.: 69033	
	Column: Meta-Analysis	
	Title: Prophylactic transcatheter arterial embolization reduces	
	rebleeding in non-variceal upper gastrointestinal bleeding: a	
1	systematic review and meta-analysis	[V]
1	Authors: Eszter Boros, Zoltán Sipos, Péter Hegyi, Brigitta Teutsch,	[Y]
	Levente Frim, Szilárd Váncsa, Szabolcs Kiss, Fanni Dembrovszky,	
	Eduard Oštarijaš, Andrew Shawyer and Bálint Erőss	
	Reviewer code: 05935310, 03727739, 05419473, and 05430684	
	First decision: 2021-07-14 02:54	
	Scientific Editor: Ya-Juan Ma	
	Date of signature: 9/14/2021 (month/day/year)	
	Editorial Office's Comments	[Y]
	Science Editor: 1 Scientific quality: This is a systematic review with	
2	meta-analysis discussing the evidence that prophylactic	
	transcatheter arterial embolization reduces rebleeding in	
	non-variceal upper gastrointestinal bleeding. The topic is	



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appropriate for WJG. (1) Classification: Grade B, B, B, A. (2) Summary of the Peer-Review Report: All 4 reviewers' reports are positive. The authors should address some specific points as follows: 1) Is this meta-analysis registered in PROSPERO database? If yes, the authors are wellcome to add this information in the text. 2) Authors are kindly requested to further clarify the sentence "Two studies[23, 24] were excluded from the quantitative synthesis due to major differences in intervention or outcome compared to other included articles." included in the first paragraph of the "Results" section. 3) In the case of work of Sildiroglu et al. [31], did the authors attempt to have a personal communication in order to further investigate the seemingly contradictory result? If yes, this should be stated at the "Methods" section. If no, the authors could comment on their decision to avoid this useful practice. 4) Given that over 10 studies were included in quantitative analysis, the authors could have performed a meta-regression using e.g. age, gender (especially by the means of percentage of male/female patients), and sample size as independent variables. In case that a revised version of the manuscript will be available in the future, I would be highly interested to re-review it. 5) The authors have followed the PRISMA 2009 statement. However, since last year the guidelines were updated, I think it is crucial that they use the PRISMA 2020 statement and update their checklist and flow diagram. 6) Regarding reference 18, they should better cite the updated Cochrane Handbook: "Higgins JPT, Thomas J, Chandler J,



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Cumpston M, Li T, Page MJ, Welch VA (editors). Cochrane Handbook for Systematic Reviews of Interventions version 6.2 (updated February 2021). Cochrane, 2021. Available from www.training.cochrane.org/handbook." 7) I appreciate the fact that the authors report the OR and 95%CI along with I2 and its p-value for each meta-analysis. However, they could consider to report the p-value for the OR as well, just to avoid readers with minimal experience in meta-analysis confusion the p-value of I2 with the p-value of the OR. 8) The following statement is inaccurate: "For this comparison, publication bias assessment by visual inspection of a Funnel-plot did not detect a small-study effect (Supplementary Figure 1)." The egger test in Supplementary Figure 1 is <0.1, and therefore there is indeed a likelihood for publication bias. The authors should rephrase their sentence to reflect that. Please use funnel plots and egger test throughout when n>10 studies. 9) Avoid use of language pertaining to "tendency", for example: "In parallel, three publications [10-12] reported the length of ICU stay, and we found a tendency for shorter ICU stay favouring PTAE, however the difference was non-significant [WMD = -1.33 days, CI: (-2.84)-0.18; I2 = 84.8%, p = 0.001] (Supplementary Figure 8)." 6. Is there any chance of population overlap between refs 23 and 26? 10) Have the authors considered performing meta-regression according to potential confounders? (ie, receipt of other concurrent treatments?). 11) All parts are almost rigorous and the conclusion are sound. With respect. Maybe the only concern, not affecting reviewer's



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	evaluation on this manuscript yet, is the indexs for clinical	
	outcomes. Giving a subgroup ananlysis for rebleeding, mortality,	
	reintervention, need for surgery and transfusion, length of hospital	
	(LOH) and intensive care unit (ICU) stay one by one will be more	
	helpful for decision of bleeding interventing timely. (3) Format:	
	There are 5 figures and 1 table. They look clear enough. (4)	
	References: A total of 40 references are cited. (5) Self-cited	
	references: there is 2 self-cited references. 2 Language evaluation:	
	Classification: Grade A, B, A, A. 3 Academic norms and rules: no	
	major issues after Google search. 4 Supplementary comments:	
	This is an unsolicited manuscript. 5 Issues raised: - revisions	
	based on reviewers' comments and suggestions check Non-Native	
	Speakers of English Editing Certificate - COI form missing 6	
	Re-Review: YES. 7 Recommendation: Potential acceptance	
	Company Editor-in-Chief: I have reviewed the Peer-Review	
	Report, full text of the manuscript, and the relevant ethics	
	documents, all of which have met the basic publishing requirements	
	of the World Journal of Gastroenterology, and the manuscript is	
	conditionally accepted. I have sent the manuscript to the author(s)	
	for its revision according to the Peer-Review Report, Editorial	
	Office's comments and the Criteria for Manuscript Revision by	
	Authors.	
3	The fixed headings are copied.	[Y]
	The title concisely summarizes the main topic of the study and is	[Y]
4	not too long (no more than 18 words). Words such as 'exploration',	
	'research', 'analysis', 'observation', and 'investigation' are avoided.	



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	The title does not start with 'The' and does not include any Arabic	
	numbers or uncommon abbreviations.	
5	A short running title is provided (no more than 6 words).	[Y]
	The authors' full family (sur)names and full/abbreviated first	[Y]
6	names are listed on the title page and are consistent with those	
	listed in the signed BPG Copyright License Agreement form.	
	The 'Author contributions' passage describes the specific	[Y]
	contribution(s) made by each author. The author's names are listed	
	in the following format: full family (sur)name followed by	
	abbreviated first and middles names.	
	e.g., "Wang CL and Liang L contributed equally to this work; Wang	
7	CL, Liang L, Fu JF, Zou CC, Hong F and Wu XM designed the	
	research study; Wang CL, Zou CC, Hong F and Wu XM performed	
	the research; Xue JZ and Lu JR contributed new reagents and	
	analytic tools; Wang CL, Liang L and Fu JF analyzed the data; and	
	Wang CL, Liang L and Fu JF wrote the manuscript. All authors	
	have read and approve the final manuscript."	
	The 'Supported by' statement describes the source(s) of financial	[Y]
8	support and includes the corresponding identification number(s)	
	and program ID(s) if available, and contains no spelling errors.	
	The 'Corresponding author' passage provides the corresponding	[Y]
	author's full first and family (sur)names, abbreviated title (e.g., MD,	
9	PhD), affiliated institute's name and complete postal address	
	(including zip code) and e-mail (written in all lowercase), and	
	contains no spelling errors.	
	The Manuscript Tracking information (i.e., Received, Peer review	[Y]
	started, First decision, Revised, Accepted, Article in press, and	
10	Published online) are provided along with the corresponding editor	
	and date for each item, and contain no spelling errors.	
11	The Abstract section is formatted according to the article-specific	[Y]
	to the district according to the district openine	



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	style (structured <i>vs</i> unstructured) and word count thresholds, as		
	follows:		
	Commentary, Frontier, Diagnostic Advances, Medical Ethics,		
	Minireview, Review, Therapeutics Advances, and Topic Highlight:		
	Non-structured abstract that is no less than 200 words.		
	Field of Vision, Case Report and Letter to the Editor:		
	Non-structured abstract that is no less than 150 words.		
	Research articles: Structured abstract with subsections for AIM (no		
	more than 20 words); METHODS (no less than 80 words); RESULTS		
	(no less than 120 words); and CONCLUSION (no more than 26		
	words).		
	The 'Key words' list provides 5-10 keywords that reflect the main	[Y]	
12	content of the study. The first letter of each keyword is capitalized,		
	and each keyword is separated by a semicolon.		
	The "citation" contains authors' names and manuscript title. The	[Y]	
	name of the first author should be typed in bold letters; the family		
	(sur) name of all authors should be typed with the first letter		
	capitalized, followed by their abbreviated first and middle initials.		
13	For example, an article by Jae Moon Yoon, Ki Young Son, Chun Sick		
	Eom, Daniel Durrance, Sang Min Park will be written as Yoon JM,		
	Son KY, Eom CS, Durrance D, Park SM. Pre-existing diabetes		
	mellitus increases the risk of gastric cancer: A meta-analysis. World J		
	Gastroenterol 2019; In press		
	The 'Core tip' provides a summary (less than 100 words) of the	[Y]	
14	study that outlines the most innovative and important arguments		
14	and core contents of the paper and will serve to effectively attract		
	readers.		



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	The 'INTRODUCTION' section clearly describes the relevant	[Y]
	background information for the study. Only the most relevant and	
	current (within the past 5 years) literature is cited, with the	
	exception of rare instances of seminal literature citations. All	
	technical terms and/or abbreviations are explained and/or defined,	
15	with the full name of abbreviations given upon first appearance in	
15	the text and the abbreviation presented in parentheses [i.e.,	
	"computed tomography (CT)"]. First-person pronouns (e.g., 'I',	
	'we') are used appropriately to clearly indicate the work performed	
	by the author(s). When weaknesses of previous studies are	
	described in the text to highlight the innovations related to the	
	current study, the information is presented carefully.	
	The 'MATERIALS AND METHODS' section clearly and accurately	[Y]
10	describes all materials and methods used to obtain the data	
16	presented in the article and is adequate for a reader to repeat the	
	study.	
	The 'RESULTS' section concisely describes the observational and	[Y]
	experimental results. Representative data and data that have	
	scientific significance are emphasized. Data is presented in either	
17	the text, a table or figure (i.e., chart, diagram, graph or image), but is	
	not repeated among each. Information presented in the tables and	
	figures clearly describes the trends, meaning, and inferences.	
	Results described in textual form are accurate, concise and clear.	
	Statistical symbols are accurate. Statistical significance is expressed	[Y]
	as ${}^{a}P$ < 0.05, ${}^{b}P$ < 0.01 (P > 0.05 usually does not need to be denoted).	
18	If there are other series of P values, $^{c}P < 0.05$ and $^{d}P < 0.01$ are used,	
	and a third series of P values is expressed as $^{\rm e}P$ < 0.05 and $^{\rm f}P$ < 0.01.	
	Statistical data is expressed as mean \pm SD or mean \pm SE.	



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	The 'DISCUSSION' section (1) describes the main purpose and	[Y]
	hypothesis of the study; (2) summarizes the most important results;	
	(3) illustrates and explains the results (but does not simply repeat	
10	the data) and draws conclusions or inferences based on the results;	
19	(4) points out the limitations of the study and their impact on the	
	results, as well as proposes further advice on future research	
	topic(s) or direction(s); and (5) describes the theoretical significance	
	and practical value of the findings.	
	The 'ACKNOWLEDGEMENTS' section expresses gratitude to any	[N]
	individuals or organizations for technical support (i.e., providing	
20	instrumentation, equipment or experimental materials, and/or	
20	assistance in experimental work), non-technical services (i.e., useful	
	inspiration, suggestions, guidance, or review), and/or any other	
	auxiliary work.	
21	The 'ARTICLE HIGHLIGHTS' section provides comments for	[Y]
21	original articles in accordance with the specified format.	
	The 'REFERENCES' section lists the references in the Vancouver	[Y]
	style. This style uses Arabic numeral in-text citations based on the	
	order of the first appearance of a source in the text. For citations	
	where the author's name is indicated in the text, a superscript	
	number should be placed following the name (i.e, "Pang et al"). For	
	citations where no author is indicated, a superscript number should	
22	be placed at the end of the sentence. Respective examples are: "Ma[1]	
	reported", "Pan et al ^[2-5] indicated"; "PCR has a high	
	sensitivity ^[6,9] ." No superscript numbers are used when the	
	reference number is described in the text; for example, "The	
	experimental method used has been described in reference [8]." The	
	style of reference citations in tables is the same as that in the text	
	(e.g., Pan et al ^[2-5] , please see reference [8]).	



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Journal references have been verified to ensure that there are no duplicate references and that the PMID numbers are correct. For references not yet included in PubMed: the name of Chinese journals is spelled out using Chinese Pinyin, with the first letter of each word capitalized (e.g., Shijie Huaren Xiaohua Zazhi); the name of journals in other languages are listed according to indexing information retrieved from Google. Book references are presented with all the information relevant to the electronic version. The number of cited references is appropriate for the article type, as follows: Commentary: no less than 50; Review: no less than 50; Review: no less than 30/26; Case Report and Letter to the Editor: no less than 1. The ethics-related statements are provided in accordance with the manuscript type (e.g., Manuscript NoInstitutional review board statement, Manuscript NoAnimal care and use statement, etc.). The names of the peer reviewers and the scientific editor are present at the end of the paper (e.g., P-Reviewer: Hugot D S-Editor: Wang JL). The order and numerical labeling of tables and figures is consistent with their appearance and presentation in the text. Symbols in tables (e.g., +, -, ×, *, *) correctly correspond to the definitions in the footnotes. Only one legend is provided for each multi-panel figure consisting of color graphs, black and white graphs, or line graphs that depicts data of the same theme. For example: Figure 1 Pathological changes in atrophic gastritis tissue before and after treatment. A:; B:; C:; D:; E:; F: Split pictures include flow charts, line graphs, histograms, and graphs including text. Unsplit pictures include meta-analysis			
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Case Report and Letter to the Editor: no less than 1. The ethics-related statements are provided in accordance with the manuscript type (e.g., Manuscript NoInstitutional review board statement, Manuscript NoAnimal care and use statement, etc.). The names of the peer reviewers and the scientific editor are present at the end of the paper (e.g., P-Reviewer: Hugot D S-Editor: Wang JL). The order and numerical labeling of tables and figures is consistent with their appearance and presentation in the text. Symbols in tables (e.g., +, -, ×, +, *) correctly correspond to the definitions in the footnotes. Only one legend is provided for each multi-panel figure consisting of color graphs, black and white graphs, or line graphs that depicts data of the same theme. For example: Figure 1 Pathological changes in atrophic gastritis tissue before and after treatment. A:; B:; C:; D:; E:; F: Split pictures include flow charts, line graphs, histograms, and	24	Review: no less than 100;	
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