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## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Gastrointestinal Endoscopy*

**Manuscript NO:** 86736

**Title:** Gallbladder plication as a rare complication of endoscopic sleeve gastropasty: A case report

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

**Peer-review model:** Single blind

**Reviewer's code:** 03487504

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor, Surgeon

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

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

**Manuscript submission date:** 2023-07-04

**Reviewer chosen by:** Geng-Long Liu

**Reviewer accepted review:** 2023-08-04 14:54

**Reviewer performed review:** 2023-08-09 12:08

**Review time:** 4 Days and 21 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 Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation



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<b>Scientific significance of the conclusion in this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
<b>Language quality</b>	<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
<b>Conclusion</b>	<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
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

#### SPECIFIC COMMENTS TO AUTHORS

The case report is well written, clear and concise and presents a rare complication of a common procedure. Although no major advancements in the management of abdominal complications after endoscopic procedures were presented, this case highlights the importance of multidisciplinary management of these patients, as well as the role of diagnostic laparoscopy. Special emphasis should be put on the multidisciplinary management, as well as the importance of early diagnosis.

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**Peer-review model:** Single blind

**Reviewer's code:** 03552996

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

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

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

**Manuscript submission date:** 2023-07-04

**Reviewer chosen by:** Geng-Long Liu

**Reviewer accepted review:** 2023-08-04 11:46

**Reviewer performed review:** 2023-08-14 09:16

**Review time:** 9 Days and 21 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input checked="" type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation



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<b>Scientific significance of the conclusion in this manuscript</b>	[ <input checked="" type="radio"/> ] Grade A: Excellent    [ <input type="radio"/> ] Grade B: Good    [ <input type="radio"/> ] Grade C: Fair [ <input type="radio"/> ] Grade D: No scientific significance
<b>Language quality</b>	[ <input checked="" type="radio"/> ] Grade A: Priority publishing    [ <input type="radio"/> ] Grade B: Minor language polishing    [ <input type="radio"/> ] Grade C: A great deal of language polishing    [ <input type="radio"/> ] Grade D: Rejection
<b>Conclusion</b>	[ <input type="radio"/> ] Accept (High priority)    [ <input type="radio"/> ] Accept (General priority) [ <input checked="" type="radio"/> ] Minor revision    [ <input type="radio"/> ] Major revision    [ <input type="radio"/> ] Rejection
<b>Re-review</b>	[ <input checked="" type="radio"/> ] Yes    [ <input type="radio"/> ] No
<b>Peer-reviewer statements</b>	Peer-Review: [ <input checked="" type="radio"/> ] Anonymous    [ <input type="radio"/> ] Onymous
	Conflicts-of-Interest: [ <input type="radio"/> ] Yes    [ <input checked="" type="radio"/> ] No

#### SPECIFIC COMMENTS TO AUTHORS

This articles describes the third case of biliary complication after endoscopic sleeve gastroplasty. The case is well presented and well explained. In case presentation the authors report: "the abdominal cavity was insufflated with carbon dioxide". Do you routinely perform laparoscopy during ESG? I think you shpuld also cite the latest article regarding this matter "DOI: 10.1016/S0140-6736(22)01280-6."