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PEER-REVIEW REPORT

Name of journal: *Artificial Intelligence in Gastrointestinal Endoscopy*

Manuscript NO: 87201

Title: The Role of Endoscopic Ultrasound in Non-variceal Upper Gastrointestinal Bleeding Management

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 00504545

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Emeritus Professor

Reviewer's Country/Territory: Spain

Author's Country/Territory: Indonesia

Manuscript submission date: 2023-07-28

Reviewer chosen by: Yu-Lu Chen

Reviewer accepted review: 2023-09-24 06:20

Reviewer performed review: 2023-09-25 09:16

Review time: 1 Day and 2 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 Grade E: Do not publish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 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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Scientific significance of the conclusion in 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 scientific significance
Language quality	<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
Conclusion	<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
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Peer-reviewer statements	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

This is a very interesting and practical review about the utility of using and endoscopic ultrasound approach for the control of bleeding from the NVUGIB in patients with portal hypertension associated. Endoscopic ultrasound (EUS) has been used recently for portal hypertension management, especially in managing acute variceal bleeding. EUS has been considered as a better visualization tool to visualize the bleeding vessel in gastroesophageal variceal bleeding. There have been studies looking at the role of EUS for managing NVUGIB, however, most of studies are case reports. Therefore, it is important it review back to see the evolution and innovation of endoscopic treatment for NVUGIB and the role of EUS for possibility to replace the endoscopic standard hemostasis management in daily practice.