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PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

Manuscript NO: 89326

Title: Coca-Cola Consumption versus Fragmentation in the Management of Patients

with Phytobezoars: A Prospective Randomized Controlled Trial

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06197075 Position: Peer Reviewer Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Greece

Author's Country/Territory: China

Manuscript submission date: 2023-10-28

Reviewer chosen by: Yu-Lu Chen

Reviewer accepted review: 2023-12-22 21:10

Reviewer performed review: 2023-12-24 07:50

Review time: 1 Day and 10 Hours

	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C:
Scientific quality	Good
	[] Grade D: Fair [] Grade E: Do not publish
Novelty of this manuscript	[] Grade A: Excellent [Y] Grade B: Good [] Grade C: Fair [] Grade D: No novelty
Creativity or innovation of	[] Grade A: Excellent [Y] Grade B: Good [] Grade C: Fair
this manuscript	[] Grade D: No creativity or innovation



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

SPECIFIC COMMENTS TO AUTHORS

In general, it is an innovative paper, since, despite the multiple case reports and case series, authors are the first to perform a randomized clinical trial. Title, abstract and keywords are appropriate regarding content and form. In addition, methods and results are presented in an appropriate manner, based on the CONSORT guidelines. Regarding figures, a better description of the legends would be appropriate. Finally, no issues arise regarding biostatistics and ethical approval. Here are some proposed revisions: Major revisions • Regarding intervention group, Coca Cola consumption is stated to last 7 days in the abstract and 5 days in the main text. Please specify • Legends of figures 2 and 3 are not easy to understand. Are both of them from the intervention group? • Why was a second endoscopy performed in intervention group? Couldn't you define dissolution rate by imaging, such as CT, in order to avoid a second intervention? • At which time point was evaluation for Gastric ulcer rate performed? During initial endoscopy? During follow up? This point should be further elucidated. Minor revisions • Line 25 (onGPBs): a gap is missing • Regarding intervention group, Coca Cola consumption is stated to last 7 days in the abstract and 5 days in the main text. Please specify • Line 25: abbreviation



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"GBs" is used without being introduced in the abstract • Line 29: "were" is not correct • Line 47-548: double use of the abbreviation instead of the full-term-should be corrected • Regarding inclusion/exclusion criteria, it would be advisable to declare the decision process for patients with history of upper GI surgery or known history of peptic ulcer disease • How was bezoar volume measured? With endoscopy or imaging? Please explain • Authors use multiple times the full text "gastric phetobezoar" instead of GBP, e.g. in legend of figure 3, even after introduction of abbreviation. Please adopt a consistency • In figure No 3, it is stated that " the gastric ulcer became shallower", obviously compared to Figure No2. However, it seems deeper. Please explain • In line 193, the name of Gaya et al would be preferable mentioned, since otherwise the reader assess that the authors refer to the present paper • Line 268: a gap is missing