

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 35331

Title: Short and long term results of endoscopic ultrasound-guided transmural drainage for pancreatic pseudocyst and walled of necrosis.

Reviewer's code: 03253499

Reviewer's country: Italy

Science editor: Ze-Mao Gong

Date sent for review: 2017-08-11

Date reviewed: 2017-08-16

Review time: 5 Days

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 checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

In this study, Watanabe et al have evaluated 103 patients with pancreatic fluid collection who underwent endoscopic ultrasound-guided transmural drainage. The patients were divided into four types according to Atalanta classification: acute peripancreatic fluid collection, acute necrotic collection, pancreatic pseudocyst, and walled-off necrosis. The authors concluded that cavity size and the proportion of pancreatic parenchymal necrosis are predictors for successful treatment of walled-off necrosis. Moreover, they suggest a prolonged stent placement in pancreatic fluid cavity with higher amylase levels, because of the possibility of collection recurrence after stent removal. Although there are some limitations, such as the retrospective design and the long study period, the paper is well written and focused on an interesting topic. The major strenght of this study is the evaluation of predictive factors of treatment outcome for walled-off necrosis

managed by endoscopic ultrasound-guided drainage alone. I think this study may be of interest to the readers of this journal.

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 35331

Title: Short and long term results of endoscopic ultrasound-guided transmural drainage for pancreatic pseudocyst and walled of necrosis.

Reviewer's code: 02954661

Reviewer's country: Romania

Science editor: Ze-Mao Gong

Date sent for review: 2017-08-11

Date reviewed: 2017-08-16

Review time: 5 Days

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input 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 checked="" 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 checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

Dear Editor, Thank you for the opportunity to review the interesting manuscript entitled 'Short and long term results of endoscopic ultrasound-guided transmural drainage for pancreatic pseudocyst and walled of necrosis' by Watanabe et al. The authors present the short- and long-term results of 103 consecutive patients with endoscopic ultrasound-guided transmural drainage for pancreatic fluid collection. The material is interesting and has merits to be accepted, after minor revision. Minor concerns: In Results - complications - should be 'pneumoperitoneum (n = 2)'. Two more minor spelling mistakes Eg. Won

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 35331

Title: Short and long term results of endoscopic ultrasound-guided transmural drainage for pancreatic pseudocyst and walled of necrosis.

Reviewer's code: 02440510

Reviewer's country: Bosnia and Herzegovina

Science editor: Ze-Mao Gong

Date sent for review: 2017-08-11

Date reviewed: 2017-08-17

Review time: 6 Days

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

COMMENTS TO AUTHORS

Manuscript Number: 35331, titled „Short and long term results of endoscopic ultrasound-guided transmural drainage for pancreatic pseudocyst and walled of necrosis’ “.The authors performed retrospective study in order to to evaluate the short and long term results of endoscopic ultrasound-guided transmural drainage (EUS-GTD) for pancreatic fluid collection (PFC), and to identify the predictive factors of treatment outcome for walled-off necrosis (WON) managed by EUS-GTD alone. Authors concluded that the reduction of WON by EUS-GTD alone was associated with the proportion of necrotic tissue and the extent of the cavity. The amylase level in the cavity might be predictive factor for recurrence of PFC. This manuscript is interesting and well organized and written, and I'm sure that brings useful information to the scientific community and clinical practice.