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PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 38381

Title: Papillary fistulotomy vs. conventional cannulation for endoscopic biliary access: a prospective randomized trial

Reviewer's code: 01558248

Reviewer's country: Taiwan

Science editor: Ya-Juan Ma

Date sent for review: 2018-02-26

Date reviewed: 2018-02-27

Review time: 20 Hours

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

COMMENTS TO AUTHORS

Authors try to compare the cannulation success, biochemical profile, and complications of the papillary fistulotomy technique vs. standard access, using a catheter and guidewire. 1. Please describe a history of PF technique and indication of your patients, because it needs enough space of papilla for the procedure of PF. 2. The indications of patients for this study? The information of CBD stone was not clear such as page 8 and table 4. 3. The changes of enzymes will be effected by the duration of the procedure and extraction of the stones. 4. The format of a scientific paper needs to be revised such as the section of the "results" and a focus in each paragraph of the section "discussion"



PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 38381

Title: Papillary fistulotomy vs. conventional cannulation for endoscopic biliary access: a prospective randomized trial

Reviewer's code: 03477256

Reviewer's country: Germany

Science editor: Ya-Juan Ma

Date sent for review: 2018-02-26

Date reviewed: 2018-02-28

Review time: 2 Days

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" 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 checked="" 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

The authors should address the following concerns/questions: 1. The manuscript is not well-written and needs support from a native speaker. 2. Was incidence of post-ERC-pancreatitis documented beyond 24 hours, especially pancreatitis may develop after 2-3 days. 3. Was increased BMI a risk factor for pancreatitis? 4. How was the management of post-interventional complications? 5. Which patients were treated with antibiotics? 6. Prior to endoscopy which patients were treated with NSAR to decrease severity of pancreatitis.