

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**Manuscript NO:** 38413

**Title:** Intralesional steroid is beneficial in benign refractory esophageal strictures: A meta-analysis

**Reviewer's code:** 02575643

**Reviewer's country:** Italy

**Science editor:** Xue-Jiao Wang

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> [ Y ] Accept
<input checked="" 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 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"/> [ Y ] 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"/> [ Y ] No	

## COMMENTS TO AUTHORS

This is an interesting retrospective study, with meta analysis of 11 studies including some 330 patients. The primary and secondary outcomes concern the usefulness of steroid injection after dilatation of esophageal stricture. There are major statistical problems because there are no prospective randomized studies available in the literature and the number of cases recorded is relatively small. Despite this problem, the study is well carried out and the conclusions are appropriate. If I may, I would like to give few suggestions, even if I am not sure that the data available in the literature can help to give an answer. -Clearly patients with esophageal stricture represent a heterogeneous population. Steroid injection is conceptually useful in strictures which present a high degree of inflammation, while it could be of no help in long standing strictures with fibrosis and scarring. Are there data, including any histological exams, to verify this



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possibility? -Continuing on this matter, it could be interesting to verify the effectiveness of steroid injection according to the etiology of the stricture, I understand that data in many papers are incomplete, but the Authors in the discussion could describe this problem, eventually reporting selected papers which analyse this matter. The study included a large time period, and there is the possibility of differences in the type of dilatation, boogie or balloon. Did the Authors find any difference using steroids in different types of dilatation technique. Overall the paper is very interesting.