



PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

Manuscript NO: 38734

Title: Successful stent-in-stent dilatation of the common bile duct through a duodenal prosthesis, a novel technique for malignant obstruction: Case report

Reviewer's code: 00050424

Reviewer's country: Greece

Science editor: Li-Jun Cui

Date sent for review: 2018-03-22

Date reviewed: 2018-03-24

Review time: 2 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input checked="" type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

1. Although it is a well written paper, the authors present their experience with only one patient. There are other publications (as the authors report) with large number of patients. The allegation that "none of the above studies had patients with both duodenal



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and CBD stents who required further endoscopic intervention " is not strong enough to justify this presentation. Probably ERCP in this condition is more challenging in the absence of stent (native papilla). 2.A video presentation might be more important. 3. The authors should comment whether the placement of Duodenal stent could have affected the patency of biliary stent.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

- The same title
- Duplicate publication
- Plagiarism
- No

BPG Search:

- The same title
- Duplicate publication
- Plagiarism
- No



PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

Manuscript NO: 38734

Title: Successful stent-in-stent dilatation of the common bile duct through a duodenal prosthesis, a novel technique for malignant obstruction: Case report

Reviewer's code: 00504581

Reviewer's country: Spain

Science editor: Li-Jun Cui

Date sent for review: 2018-03-22

Date reviewed: 2018-03-26

Review time: 4 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input checked="" type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

I would suggest the authors to make specific comments about the different type of duodenal stenosis and biliary stenosis, the difficulties to manage each one , improving the discussion and the references It is very well known the way of managing these



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type of patients with malignant duodenal stenosis associated firstly, concurrently or latterly with a new malignant biliary stenosis, As the authors pointed out there are some review dealing with this type of the cases. (Hamada T, Moon JH) and other not cited (Baron T Gut and liver , 2010 and so on) . the treatment of an initial malignant biliary stenosis which in the evolution developed a malignant duodenal stenosis type II, and treated with a new duodenal stent is the most frequent scenario of biliary and duodenal stenosis to deal with ,and the easier one . The more difficult case is the treatment of a malignant biliary stenosis in patients with a duodenal stent and with a naïve papilla. However, due to the patient long survival with a previous biliary stent, the authors' patient developed a duodenal stenosis type II and a disfunction of the previously placed biliary stent, and the need of two new stenting procedures of duodenum and biliary duct to treat them At a first sight the physician in charge could think there is no way to try a new endoscopic approach, but the authors showed and taught us that it is possible a new try of biliary stenting ,despite the fact of having one previously biliary stent and a new duodenal stent recently placed The case presented is not so difficult to manage because the access of the CBD is facilitated by the previous biliary stenting, and this is something the authors should comment in the Discussion, and perhaps is the teaching of the case

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

- [] The same title
- [] Duplicate publication
- [] Plagiarism
- [Y] No



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BPG Search:

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PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

Manuscript NO: 38734

Title: Successful stent-in-stent dilatation of the common bile duct through a duodenal prosthesis, a novel technique for malignant obstruction: Case report

Reviewer's code: 00070271

Reviewer's country: Mexico

Science editor: Li-Jun Cui

Date sent for review: 2018-03-22

Date reviewed: 2018-03-27

Review time: 5 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input checked="" type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

Common Bile Duct Through a Duodenal Prosthesis, a Novel Technique for Malignant Obstruction: Case report GRAMMAR CORRECTIONS ABSTRACT First paragraph - seventh line: change "patient" for "the patient" First paragraph - eighth



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line: change "decrease" for "a decrease" First paragraph - eighth line: change "post stenting" for "post-stenting" CASE INTRODUCTION First paragraph - fifth line: change "placement" for "the placement" Second paragraph - thirteenth line: change "middle" for "the middle" Second paragraph - fourteenth line: change "were" for "was" DISCUSSION Second paragraph - sixth line: change "though" for "through" Third paragraph - fifth line: change "success" for "a success" Fourth paragraph - second line: change "duodenal" for "a duodenal" Fifth paragraph - first line: change "ultrasound guided" for "ultrasound-guided" Fifth paragraph - sixth line: change "short term" for "short-term" Sixth paragraph - sixth line: change "was" for "were" I recommend the authors improve the quality of radiographic images.

INITIAL REVIEW OF THE MANUSCRIPT

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- No

BPG Search:

- The same title
- Duplicate publication
- Plagiarism
- No



PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

Manuscript NO: 38734

Title: Successful stent-in-stent dilatation of the common bile duct through a duodenal prosthesis, a novel technique for malignant obstruction: Case report

Reviewer’s code: 01438495

Reviewer’s country: Japan

Science editor: Li-Jun Cui

Date sent for review: 2018-03-22

Date reviewed: 2018-04-12

Review time: 21 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good		<input checked="" type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	(General priority)	Peer-reviewer’s expertise on the topic of the manuscript:
<input type="checkbox"/> Grade E: Do not publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Minor revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Major revision	<input type="checkbox"/> General
		<input type="checkbox"/> Rejection	<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

This paper describes the interventional endoscopic treatment of pancreatic cancer with GOO and bile duct obstruction. The described method is not new and usually performed in a clinical setting, but the the description is appropriate for this procedure and valuable



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for readers. Author mention the final diagnosis of the disease causing the disorders, also in the title.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

- The same title
- Duplicate publication
- Plagiarism
- [Y] No

BPG Search:

- The same title
- Duplicate publication
- Plagiarism
- [Y] No