



PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 40377

Title: Live birth after hysteroscopy performed inadvertently during early pregnancy: A case report and review of literature

Reviewer's code: 00742116

Reviewer's country: Greece

Science editor: Fang-Fang Ji

Date sent for review: 2018-07-02

Date reviewed: 2018-07-11

Review time: 9 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 type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input checked="" 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 checked="" type="checkbox"/> Major revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

GENERAL COMMENTS The Authors present another case of diagnostic hysteroscopy performed inadvertently during early pregnancy. Interestingly, the pregnancy ended-up with the successful delivery of a healthy baby. The manuscript needs review by a



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7901 Stoneridge Drive, Suite 501,
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proofreader with good written English skills. Although no spelling or syntax errors are present, elementary English render the paper of relatively poor language quality. Furthermore, Discussion section needs improvement, with reference to some more papers relative to this issue. **SPECIFIC COMMENTS** **KEY WORDS** Vaginoscopy should be omitted **INTRODUCTION** The Authors state “We here report the first case of a woman who had pregnancy found accidentally during diagnostic hysteroscopy and the procedure did not disturb the pregnancy.” However, this is not the first case reported! Actually a brief search by myself revealed at least another 4 cases: Ongoing pregnancy in a woman who inadvertently underwent office hysteroscopy during early pregnancy. Erenus M, Sezen D. Fertil Steril. 2005 Jan;83(1):211-2. Early pregnancy is elusive and robust. AL-Mizyzen E1, Barnick CG, Grudzinskas JG. Early Pregnancy. 2001 Apr;5(2):144-8 Early intrauterine pregnancy during major surgery: the importance of preoperative assessment and advice. Pontré JC, McElhinney B BMJ Case Rep. 2018 Jan 17;2018. pii: bcr-2017-222731. doi: 10.1136/bcr-2017-222731. A case report of inadvertent hysteroscopy and laparoscopy in a patient of uterus didelphys with early pregnancy. Dwivedee K1, Banfield PJ. J Obstet Gynaecol. 2007 Aug;27(6):638-9. **DISCUSSION** The References in the paper do not necessarily correspond to the Reference List found at the end... For example notice in the Discussion: “Assaf, et al reported successful pregnancy outcomes after removal of intrauterine devices by CO2 hysteroscopy during early pregnancy. As was reported, 31 of 50 patients achieved full-term pregnancy after the procedure[1]” whereas in the Ref List it is No 2! “Erenus and Seze” instead of “Mith,at and Devrin” are the Surnames of the Authors of reference No 7 The Authors state two Papers where IUD was removed hysteroscopically during pregnancy (Assaf et al 1992 and Cohen et al, 2017). However, many other papers have been published on that issue in between. Furthermore, publications on hysteroscopic removal of Levonorgestrel IUD during pregnancy have



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been published. Please make a brief notice... The Authors state: "Live birth outcomes have been reported in a few cases when using invasive measures such as hysteroscopy and hysterosalpingography during pregnancy." It would be better to enrich their statement with the inclusion of intrauterine infusion of dye through laparoscopy (dye test or chromotubation). Given that this is not the first case reported on that issue, the Authors are advised to refer to some of the other cases reported in the literature and are omitted from the Discussion, such as: Early intrauterine pregnancy during major surgery: the importance of preoperative assessment and advice. Pontré JC, McElhinney B *BMJ Case Rep.* 2018 Jan 17;2018. pii: bcr-2017-222731. doi: 10.1136/bcr-2017-222731. A case report of inadvertent hysteroscopy and laparoscopy in a patient of uterus didelphys with early pregnancy. Dwivedee K1, Banfield PJ. *J Obstet Gynaecol.* 2007 Aug;27(6):638-9. The Authors should mention that instead of discontinuating the hysteroscopic procedure and performing later on blood tests to confirm the tentative diagnosis of early pregnancy, the best option would be to pause the procedure collect a urine sample and test it for urinary beta HCG at the time of surgery! A viable pregnancy of 4+weeks would be identifiable then. A common practice would be that all women scheduled for elective pelvic surgery should be advised to use effective contraception or avoid unprotected sexual intercourse in the preceding month given that a hCG test prior to surgery to exclude pregnancy is not considered cost effective as the Authors state.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

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



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PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 40377

Title: Live birth after hysteroscopy performed inadvertently during early pregnancy: A case report and review of literature

Reviewer's code: 03261379

Reviewer's country: Romania

Science editor: Fang-Fang Ji

Date sent for review: 2018-07-17

Date reviewed: 2018-07-17

Review time: 7 Hours

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 checked="" 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 type="checkbox"/> Rejection	<input checked="" type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

Congratulations on your successful case. I think it's a well written article, although there are some minor grammatical corrections to be made. The images are very nice and the case presentation is very clear. I suggest you update your references and comment more



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on the use of hysteroscopy and the difference between techniques.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

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- Plagiarism
- [Y] No

BPG Search:

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- [Y] No



PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 40377

Title: Live birth after hysteroscopy performed inadvertently during early pregnancy: A case report and review of literature

Reviewer's code: 00742268

Reviewer's country: Saudi Arabia

Science editor: Fang-Fang Ji

Date sent for review: 2018-07-02

Date reviewed: 2018-07-20

Review time: 18 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 checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input 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 checked="" type="checkbox"/> General
		<input type="checkbox"/> Rejection	<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

The clinical researchers report on the successful pregnancy after an inadvertently performed hysteroscopy in very early pregnancy. Comments Use of - et al. - in case of 2 authors is not correct. Citation for reference 7 is not matching.



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INITIAL REVIEW OF THE MANUSCRIPT

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- [Y] No

BPG Search:

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- Duplicate publication
- Plagiarism
- [Y] No