



PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

Manuscript NO: 44815

Title: Update on management of gastric varices

Reviewer's code: 03029329

Reviewer's country: Japan

Science editor: Fang-Fang Ji

Date sent for review: 2018-12-07

Date reviewed: 2018-12-16

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 checked="" 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 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 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

The authors reviewed management of gastric varices. They mentioned that there was little literature regarding management of gastric varices compared with those of oesophageal varices. From the literatures and trials including mainly patients with oesophageal varices bleeding, they recommend that, in fundal varices, management



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with cyanoacrylate injections is the preferred option leaving TIPS or BRTO as a rescue therapy. Furthermore, they mentioned that, with regards to prophylaxis, cyanoacrylate injection has a role in both primary and secondary prophylaxis, but that most experts prefer to suggest non-selective beta-blockers due to less invasive and easily accessible treatment. There was still overwhelmingly lack of prospective studies for their conclusion. This review is well summarized and appears nearly acceptable for publication, but there are several grammatical and spelling errors to be corrected.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

- The same title
- Duplicate publication
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- No

BPG Search:

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PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

Manuscript NO: 44815

Title: Update on management of gastric varices

Reviewer's code: 01553211

Reviewer's country: Taiwan

Science editor: Fang-Fang Ji

Date sent for review: 2018-12-07

Date reviewed: 2018-12-21

Review time: 14 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 checked="" 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 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

This article deals with a review on the issue of gastric varices. A few flaws exist: 1. Confusions between therapy of esophageal varices (EV) and gastric varices. Though initial therapies are similar, however, the review of antibiotic therapy, vasoconstrictors and balloon tamponade appeared to focus on articles dealing with EV. If there are not



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studies specifically on GV, these articles could be removed. 2. Primary prophylaxis for GOV1; The description of "GOV1 gastric varices should follow same guidelines as oesophageal varices" seems not quite correct. Is there evidence ? 3. Confusion between 2nd prevention & therapy of acute bleeding. Since several trials included therapy of acute bleeding & prevention of bleeding in controlled studies between glue injection & ligation. More detailed examination of these data is needed. For example : A meta-analysis of tissue adhesive versus EBL for active GV bleeding, only including three suitable trials with 194 patients, reported that control of bleeding was achieved in 93.9% of patients treated with tissue adhesive versus 79.5% in the EBL groups ($P = 0.032$). ----. These studies also assess a comparison of rebleeding. 4. conclusion the description: With regards to prophylaxis, there is scarce data on secondary prophylaxis ---. This seems not correct. A lot of studies have been published to prevent GV rebleeding. 5. The natural course including mortality should be described.

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PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

Manuscript NO: 44815

Title: Update on management of gastric varices

Reviewer's code: 02530754

Reviewer's country: Spain

Science editor: Fang-Fang Ji

Date sent for review: 2018-12-24

Date reviewed: 2018-12-29

Review time: 4 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	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input 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 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

The present manuscript is a very illustrative review, which summarizes the available evidence regarding management of gastric varices in patients with portal hypertension, including a critical appraisal. The topic is of high interest. The manuscript is well written and structured. Although informative in its present version, the paper would benefit



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from including some supporting material (tables/figures) as detailed below. The authors are kindly invited to consider the following comments: - I could not find the abstract and keywords. -A figure illustrating the anatomy of gastric varices would be welcomed. - In the legend of table 1, the authors should clarify the source of the presented data by quoting the corresponding publication. - I would recommend the authors to include tables to summarize the different therapeutic strategies available as primary/secondary prophylaxis and management of acute bleeding. - If the authors consider it appropriate, a therapeutic algorithm could be designed. - In the “management of acute bleeding” section it can be read: “Terlipressin is a synthetic analogue of vasopressin that can be administered as intermittent injections instead of continuous intravenous infusion and it has a safer adverse reactions profile”. Please quote the randomized trial this evidence comes from. - In page 9 it can be read: “They concluded that tissue adhesives were more superior...”. Please, remove the word “more” from the sentence. - I missed a comment regarding the potential use of Hemospray (or similar devices) in the management of acute bleeding of gastric varices. I am aware that the evidence is weak and comes mainly from short uncontrolled series but still a short comment would be welcomed.

INITIAL REVIEW OF THE MANUSCRIPT

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PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

Manuscript NO: 44815

Title: Update on management of gastric varices

Reviewer’s code: 02860871

Reviewer’s country: Indonesia

Science editor: Fang-Fang Ji

Date sent for review: 2018-12-24

Date reviewed: 2018-12-29

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 polishing	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input checked="" 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 checked="" type="checkbox"/> Major revision	<input type="checkbox"/> General
		<input type="checkbox"/> Rejection	<input checked="" type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

This article entitled “Update on management of gastric varices” by Louisa J Vine et al is interesting in its field. The authors provide a course in gastric varices management therapy. This article is well written with few typos inside, however the writing formats shall be adjusted to its standard. Here are some comments: 1. Provide a schematic



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figure or table explaining all the possible management therapy and its obstacles in gastric varices 1. Because gastric varices are more common in segmental portal hypertension, it would be better if authors also provide more explanation and comments on its associated management therapy 2. Put numbers on every subtitles and sub sub titles then it will be more clear. 3. Please provide reference on sentence in page 2 : "Gastric varices are more common in segmental portal hypertension, due to portal vein thrombosis, than in generalized portal hypertension due to cirrhosis. This is probably due to...." 4. Please provide reference for table 1. 5. Provide reference for this sentence on page 4: "There are two prospective trials comparing NSBB versus glue injection alone and versus glue injection plus NSBB."

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PEER-REVIEW REPORT

Name of journal: World Journal of Hepatology

Manuscript NO: 44815

Title: Update on management of gastric varices

Reviewer's code: 03647881

Reviewer's country: Taiwan

Science editor: Fang-Fang Ji

Date sent for review: 2018-12-24

Date reviewed: 2018-12-31

Review time: 7 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	<input checked="" type="checkbox"/> Accept	Peer-Review:
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			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

As author mention, there is still a wide area for research in gastric varices therapy in the future even many studies evaluate various therapies but remain controversial in clinical practice.



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