

## PEER-REVIEW REPORT

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

**Manuscript NO:** 45337

**Title:** Risk factors for local recurrence and appropriate surveillance interval after endoscopic resection

**Reviewer's code:** 02823396

**Reviewer's country:** Spain

**Science editor:** Jia-Ping Yan

**Date sent for review:** 2018-12-25

**Date reviewed:** 2018-12-29

**Review time:** 14 Hours, 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 type="checkbox"/> Grade B: Minor language	(High priority)	<input 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 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 have reviewed with great interest this retrospective study focused on risk factors of recurrence after endoscopic resection of 1.412 lesions in 360 patients. The authors have found than 8.6% of patients present recurrence, with a increased risk in piecemeal



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resection with equal of more than 5 pieces. The authors suggest a protocol of follow-up based on more pieces mean shorter follow-up. This type of studies in crucial for endoscopists, so I would like the authors give more information in: 1) Why do you talk of recurrence in patients (8.6%)?, I think is more important recurrence in lesions (?? in 1412 lesions). 2) I need a table / figure with the different types of techniques (Polypectomy, En-bloc EMR, Piecemeal EMR, En-bloc ESD and Piecemeal ESD)

#### **INITIAL REVIEW OF THE MANUSCRIPT**

##### ***Google Search:***

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

##### ***BPG Search:***

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No