



**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