



PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 46846

Title: Development and validation of a model to determine risk of refractory benign esophageal strictures

Reviewer's code: 02839978

Reviewer's country: Italy

Science editor: Fang-Fang Ji

Reviewer accepted review: 2019-02-28 08:04

Reviewer performed review: 2019-03-10 19:55

Review time: 10 Days and 11 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 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 study seems statistically well conducted. It deals with a very interesting topic. By the way, the authors' results meet the typical findings of the daily practice. The difference is that, thanks to this work, risks factors are statistically proven. I also would



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like the authors to define if their findings have an impact on daily practice or not. For instance, do the presence of a bad or score modify the endoscopic (dilatation vs stenting) and/or surgical indication? If so, your work could have a stronger impact on literature. I presume that probably your score does not modify daily clinical behaviour since at the end, oesophageal dilation is always the first attempt to do, even in the stenosis with bad prognosis. Therefore, I have some concerns on the usefulness of your work. The work must revised by a proficient English author. Also please avoid contracted forms (e.g "didn't): this is a formal academic work and not a conversation among friends.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

- The same title
- Duplicate publication
- Plagiarism
- No

BPG Search:

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PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 46846

Title: Development and validation of a model to determine risk of refractory benign esophageal strictures

Reviewer's code: 03029329

Reviewer's country: Japan

Science editor: Fang-Fang Ji

Reviewer accepted review: 2019-03-12 10:14

Reviewer performed review: 2019-03-17 03:31

Review time: 4 Days and 17 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 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 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 established a risk-scoring model predicting refractory benign esophageal strictures (RBES) in benign esophageal strictures and explored the clinical effectiveness and adverse events in patients with RBES. They presented that 57 out of 507 patients



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(11.3%) and that the success rate of patients treated with dilatation was higher than with stents. Their study was meaningful and important, but it possesses several problems to be revised. As they indicated it, their study was a single-center design with a retrospective manner, and had a potential selection bias. The authors would better show the cascade how they chose the treatment plan. And also, they should show some data at the result part instead of the discussion part. Finally, there are several presenting errors at tables to be corrected.

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PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 46846

Title: Development and validation of a model to determine risk of refractory benign esophageal strictures

Reviewer's code: 02942798

Reviewer's country: Slovakia

Science editor: Fang-Fang Ji

Reviewer accepted review: 2019-03-11 17:35

Reviewer performed review: 2019-03-18 22:09

Review time: 7 Days and 4 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 type="checkbox"/> Grade B: Minor language	(High priority)	<input 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 checked="" 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 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

Dear sir, thank you to select me to review manuscript: Qing Lu et al. Development and Validation of a Model to Determine Risk of Refractory Benign Esophageal Strictures. Study has retrospective design, 507 patients with benign esophageal stenosis were



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evaluated, patients has been treated by dilation or by stent, 11,2% patients progressed to RBES. The primary outcome was to calculate a risk-scoring model predicting RBES in benign esophageal strictures. Age, etiology, number and length of strictures were the independent risk factors for the development of RBES. Authors constructed risk-scoring model for predicting of RBES in benign esophageal strictures. Study is well made, statistical methods are adequate, discussion is sufficient, but some changes to improve of the quality of the manuscript are recommended: 1) Please explain the indication of endoscopic methods (dilation and stent) for the treatment of benign stenosis and RBES. 2) 1146 patients had been treated by endoscopy for benign esophageal stricture, but only 507 had been enrolled into final analysis. Please specify, why 639 patients had been excluded from the analysis. 3) Please explain in detail, how were created Development and Validation cohorts for risk-scoring model for predicting of RBES in benign esophageal strictures. 4) The risk score ranged from 0 to 9 points. Patient could get 1 point for age, 4 points for etiology, 1 point for number of strictures and 2 points for length of strictures, which is a maximum of 8 points, see Table 4. Please explain how to score 9 points? 5) Please edit the references. 6) English language polishing is needed. My decision is major revision.

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