



PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Surgery

Manuscript NO: 49992

Title: Comparison of treatment modalities in pancreatic pseudocyst: A population based study

Reviewer’s code: 00053659

Reviewer’s country: Japan

Science editor: Ruo-Yu Ma

Reviewer accepted review: 2019-07-14 21:21

Reviewer performed review: 2019-07-15 02:38

Review time: 5 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 checked="" 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 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 Grade E: Do not publish	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 checked="" type="checkbox"/> Minor revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Major revision	<input 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

Wang et al. reported a clinical outcome comparing to percutaneous and open surgical drainage for pancreatic pseudocysts using 2016 NIS database. They found that the laparoscopic approach associated with the lowest rate of RBC transfusion. It had lower



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short-term complications, including acute renal failure, urinary tract infection, sepsis, and acute respiratory failure. The study is interesting; however, several concerns should make them clear. Please provide HCUP Data Use Agreements and proof of online training. Please present a checklist of key elements such as acknowledgment for NIS, research design, and data analysis. also, coomonly stand for?

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

- The same title
- Duplicate publication
- Plagiarism
- No

BPG Search:

- The same title
- Duplicate publication
- Plagiarism
- No



PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Surgery

Manuscript NO: 49992

Title: Comparison of treatment modalities in pancreatic pseudocyst: A population based study

Reviewer’s code: 00043819

Reviewer’s country: Italy

Science editor: Ruo-Yu Ma

Reviewer accepted review: 2019-07-15 08:35

Reviewer performed review: 2019-07-17 13:32

Review time: 2 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 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 checked="" type="checkbox"/> Advanced
		<input checked="" type="checkbox"/> Major revision	<input 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

Wang et al. conducted a retrospective study about the different treatment (laparoscopic or open surgical approach, percutaneous drainage) of pancreatic pseudocyst, using the Healthcare Cost and Utilization Project-Nationwide Inpatient Sample. Laparoscopic



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surgical approach was associated with lower rate of transfusion and short-term complications and it had lowest total charge. The topic is interesting, but an important procedure, the endoscopic drainage, is not considered in the analysis. Moreover the etiology of pseudocyst include both acute and chronic pancreatitis and different type of hospitals with inevitably different approach to pseudocyst management. So, it is difficult to draw definitive conclusions. these points should be discussed more extensively.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

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- Plagiarism
- No

BPG Search:

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- Duplicate publication
- Plagiarism
- No