

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastrointestinal Endoscopy

**Manuscript NO:** 52048

**Title:** Colonoscopic management of diverticular disease

**Reviewer's code:** 01804557

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Adjunct Professor

**Reviewer's country:** Taiwan

**Author's country:** United States

**Reviewer chosen by:** Artificial Intelligence Technique

**Reviewer accepted review:** 2019-10-18 13:06

**Reviewer performed review:** 2019-10-21 13:18

**Review time:** 3 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:
<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 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

The authors had reported the recent progress on the colonic diverticular disease



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management, especially on the treatment of diverticular bleeding and stenting for strictures related to prior acute diverticulitis. 1.The authors reported that "a recent meta-analysis comparing coagulation, EBL, and TTS clips in the treatment of diverticular bleeding demonstrated comparable rates of initial hemostasis and prevention of early rebleeding between the three treatment modalities", and also stated that "localization of such lesions can be difficult given the potential for numerous diverticula throughout the colon that require investigation, inadequate bowel preparation, and the fact that diverticular bleeding frequently stops spontaneously or can be intermittent". Is there any data comparing the outcome among conservative treatment and these progress management on colonic diverticular bleeding? Further large-scale prospective randomized studies might be needed with regard to utility and optimal application/patient selection. 2.The authors reported that "Our experience with colonic stenting of diverticulitis-associated strictures has been largely very favorable; in >75% of patients, it has permitted colonic decompression and prepping followed by 1-stage segmental resection in lieu of emergency colostomy followed by stoma takedown and colo-colonic anastomosis". However, these strictures tend to be relatively rigid, is there any complications following the SEMS procedure should be informed for those un-experienced beginners?

## **INITIAL REVIEW OF THE MANUSCRIPT**

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

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



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- ☐ No

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastrointestinal Endoscopy

**Manuscript NO:** 52048

**Title:** Colonoscopic management of diverticular disease

**Reviewer's code:** 02919626

**Position:** Peer Reviewer

**Academic degree:** AGAF

**Professional title:** Professor

**Reviewer's country:** Japan

**Author's country:** United States

**Reviewer chosen by:** Jia-Ping Yan

**Reviewer accepted review:** 2019-10-29 03:19

**Reviewer performed review:** 2019-11-01 22:05

**Review time:** 3 Days and 18 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 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

This manuscript is well written editorial and this reviewer require additional short

comment concerning two points if it is possible. 1, If it is possible please give a short comment in the manuscript concerning a treatment below. High-dose barium impaction therapy for the recurrence of colonic diverticular bleeding: a randomized controlled trial. Nagata N, Niikura R, Shimbo T, Ishizuka N, Yamano K, Mizuguchi K, Akiyama J, Yanase M, Mizokami M, Uemura N. Ann Surg. 2015; 261(2):269-75 2, If it is possible please give a short comment on an opinion below. Endoscopic hemostasis is only indicated for diverticulum with stigmata of recent hemorrhage (SRH), but the detection rates of SRH are relatively low. Therefore, efforts to increase the detection are the other key for improving CDB management. Urgent colonoscopy and the triage by early contrast enhanced CT may be candidates for the efforts and further data are necessary to conclude. Epidemiology of colonic diverticula and recent advances in the management of colonic diverticular bleeding. Kaise M, Nagata N, Ishii N, Ohmori J, Goto O, Iwakiri K. Dig Endosc. 2019 Oct 3. doi: 10.1111/den.13547. [Epub ahead of print]

## INITIAL REVIEW OF THE MANUSCRIPT

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- ☒ No

### *BPG Search:*

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- ☐ Plagiarism
- ☒ No

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastrointestinal Endoscopy

**Manuscript NO:** 52048

**Title:** Colonoscopic management of diverticular disease

**Reviewer's code:** 02941694

**Position:** Peer Reviewer

**Academic degree:** MD, PharmD

**Professional title:** Professor

**Reviewer's country:** South Korea

**Author's country:** United States

**Reviewer chosen by:** Jia-Ping Yan

**Reviewer accepted review:** 2019-10-29 23:10

**Reviewer performed review:** 2019-11-16 00:23

**Review time:** 17 Days and 1 Hour

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
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publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
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			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input type="checkbox"/> No

### SPECIFIC COMMENTS TO AUTHORS

This paper does not organize the topic well.



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## INITIAL REVIEW OF THE MANUSCRIPT

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- ☐ Plagiarism
- ☐ No

### *BPG Search:*

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