

## PEER-REVIEW REPORT

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

**Manuscript NO:** 52648

**Title:** A Gastrocolic Fistula in Crohn's Disease Detected by Oral Agent Contrast-enhanced Ultrasound: A Case Report of A Novel Ultrasound Modality

**Reviewer's code:** 03724099

**Position:** Editorial Board

**Academic degree:** MD

**Professional title:** Assistant Professor

**Reviewer's Country/Territory:** United States

**Author's Country/Territory:** China

**Manuscript submission date:** 2020-01-15

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2020-01-15 04:44

**Reviewer performed review:** 2020-01-15 04:56

**Review time:** 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 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 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**

This is an interesting case report on the use of OA-CEUS for the diagnosis of gastrocolic fistula. As mentioned by the authors, it is a rare condition. A case series from 1992 reported on 27 cases of gastric fistula in CD and recommended Ba meal vs Ba enema (preferable) for the diagnosis of GC fistula. Few comments: on what basis did the authors suspect a GC fistula? Why Ba enema or meal were not utilized to look for a GCF.

## **INITIAL REVIEW OF THE MANUSCRIPT**

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

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ [ Y ] No

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

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ [ Y ] No