



**PEER-REVIEW REPORT**

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

**Manuscript NO:** 53037

**Title:** The predictors for endoscopic balloon dilatation in strictures after esophageal atresia repair - a retrospective study

**Reviewer's code:** 02458621

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

**Reviewer's country:** Netherlands

**Author's country:** China

**Manuscript submission date:** 2019-12-04

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2019-12-04 08:46

**Reviewer performed review:** 2019-12-04 09:28

**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 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 checked="" 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 type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No



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#### **SPECIFIC COMMENTS TO AUTHORS**

Abstract, introduction: "however, there are few publications on the predicting factors for outcomes exist in the literature"I don't understand this sentece, do you mean: there are few publications ABOUT the predicting factors...? Methods: "The children with anastomotic esophagea"I should be children with anastomotic esophageal, without the "Benign esophageal stricture is the problem that pediatric gastroenterologist often encounters" shoudl be Benign esophageal stricture is a problem that pediatric gastroenterologist often encounters. "The Ethics Committees of Shenzhen Children's Hospital approved the analysis and they waived the need for informed consent (January 15, 2019), and the study was carried out in accordance with principles of the Declaration of Helsink" very good but we need a reference number/code from the Ethics Commitees regarding this study You should provide more information about primary repair of esophageal atresia: e.i. mean age at surgery, postoperative complications, open or scopic repair etc en whether this influences the outcomes of EBD

#### **INITIAL REVIEW OF THE MANUSCRIPT**

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

- The same title
- Duplicate publication
- Plagiarism
- No

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

- The same title
- Duplicate publication



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**PEER-REVIEW REPORT**

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

**Manuscript NO:** 53037

**Title:** The predictors for endoscopic balloon dilatation in strictures after esophageal atresia repair - a retrospective study

**Reviewer's code:** 02520738

**Position:** Editorial Board

**Academic degree:** MD

**Professional title:** Associate Professor

**Reviewer's country:** Italy

**Author's country:** China

**Manuscript submission date:** 2019-12-04

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2019-12-05 17:55

**Reviewer performed review:** 2019-12-07 11:51

**Review time:** 1 Day 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 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



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#### **SPECIFIC COMMENTS TO AUTHORS**

the paper is good and well written

#### **INITIAL REVIEW OF THE MANUSCRIPT**

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

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- No



**PEER-REVIEW REPORT**

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

**Manuscript NO:** 53037

**Title:** The predictors for endoscopic balloon dilatation in strictures after esophageal atresia repair - a retrospective study

**Reviewer's code:** 00159990

**Position:** Peer Reviewer

**Academic degree:** PhD

**Professional title:** Professor

**Reviewer's country:** Turkey

**Author's country:** China

**Manuscript submission date:** 2019-12-04

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2019-12-09 21:24

**Reviewer performed review:** 2019-12-09 22:02

**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 checked="" 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 checked="" 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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#### **SPECIFIC COMMENTS TO AUTHORS**

This is a valuable study demonstrating the factors that influence the success of endoscopic balloon dilatation. Some spelling errors need to be corrected (e.g. Helsink, sever).

#### **INITIAL REVIEW OF THE MANUSCRIPT**

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- No



**PEER-REVIEW REPORT**

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

**Manuscript NO:** 53037

**Title:** The predictors for endoscopic balloon dilatation in strictures after esophageal atresia repair - a retrospective study

**Reviewer's code:** 03285323

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Professor

**Reviewer's country:** Turkey

**Author's country:** China

**Manuscript submission date:** 2019-12-04

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2019-12-04 16:33

**Reviewer performed review:** 2019-12-10 18:17

**Review time:** 6 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
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## **SPECIFIC COMMENTS TO AUTHORS**

I have read the manuscript entitled “The predictors for endoscopic balloon dilatation in strictures after esophageal atresia repair - a retrospective study”. In this study, the authors aimed to investigate the predictive factors for outcome of endoscopic balloon dilatation (EBD) in esophageal strictures after surgical repair. They conclude that the diameter, length and number of the strictures were the most important predictive factors for clinical outcomes of EBD in pediatric esophageal stricture. The interval between surgery and the first EBD was another factor for response. In general, it is a well-designed manuscript which would contribute the literature. However, poor English lowers its academic quality. Hence, its language needs polishing. Such as title could be revised as “The predictors for outcomes of endoscopic balloon dilatation in strictures after esophageal atresia repair - a retrospective study”. Besides, there are many typographical errors and misspelling which need to be corrected for example “structure” instead of “stricture” in Abstract. The length of strictures should be stated in results of Abstract for conclusion. Some abbreviations are inappropriate. After an important language redaction the manuscript would be better clear.

## **INITIAL REVIEW OF THE MANUSCRIPT**

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

- [ ] The same title
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### ***BPG Search:***



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