



PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 56494

Title: Endoscopic retrograde cholangiopancreatography in the treatment of pancreaticopleural fistula in children

Reviewer's code: 03646569

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Doctor

Reviewer's Country/Territory: Bulgaria

Author's Country/Territory: China

Manuscript submission date: 2020-05-31

Reviewer chosen by: AI Technique

Reviewer accepted review: 2020-06-05 19:07

Reviewer performed review: 2020-06-06 13:58

Review time: 18 Hours

| | |
|---------------------------------|---|
| Scientific quality | <input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish |
| Language quality | <input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection |
| Conclusion | <input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection |
| Re-review | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Peer-reviewer statements | Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |



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SPECIFIC COMMENTS TO AUTHORS

In their manuscript, entitled “Endoscopic Retrograde Cholangiopancreatography in the Treatment of Pancreaticopleural Fistula in Children”, Zhang J et al. discuss the treatment modalities of a rare complication of chronic pancreatitis developed in children. They retrospectively analyzed 7 cases and performed review of the available publications on the topic. Pancreatic ascites and pancreaticopleural fistulas are rare complications of chronic pancreatitis and still there is no consensus, determining the best treatment option and no established algorithm to deal with this condition. Most of the publications include case reports or small case series and defining the best evidence- based treatment option is still impossible. The published results from case series suggest that endoscopy should be first line therapy in cases of pancreatic ascites and pancreaticopleural fistulas, complicating chronic pancreatitis and indicate poor results of conservative therapy and high morbidity and mortality associated with surgery. In their manuscript Zhang et al. analyze only 7 patients and conclude that endoscopic therapy is at least not inferior to surgery. The number of cases is very small and making statistically significant conclusions and recommendations is impossible. They also conclude that there was no difference in the hospital stay between the two treatment modalities without discussing the reasons. Complications of surgery and endoscopy are not mentioned. Technical details of surgical interventions and endoscopic procedures are also not discussed. Probably it will help to explain the prolonged hospital stay. The language quality (style and grammar) also needs corrections. In general complications of pancreatic diseases like pleural effusions and pancreatic ascites are rare and published data is scant. Both conditions are related with high morbidity and mortality and there is no consensus according their treatment. In my opinion this topic is very important and after minor revision this manuscript should be published. More published data according these



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problems would help to establish the best treatment modality in the future.



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Name of journal: World Journal of Gastroenterology

Manuscript NO: 56494

Title: Endoscopic retrograde cholangiopancreatography in the treatment of pancreaticopleural fistula in children

Reviewer's code: 03029716

Position: Editorial Board

Academic degree: FACG, PhD

Professional title: Doctor, Professor, Senior Lecturer, Senior Researcher, Staff Physician

Reviewer's Country/Territory: Indonesia

Author's Country/Territory: China

Manuscript submission date: 2020-05-31

Reviewer chosen by: AI Technique

Reviewer accepted review: 2020-06-02 02:55

Reviewer performed review: 2020-06-11 07:50

Review time: 9 Days and 4 Hours

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|---------------------------------|---|
| Scientific quality | <input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish |
| Language quality | <input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection |
| Conclusion | <input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection |
| Re-review | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Peer-reviewer statements | Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |



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SPECIFIC COMMENTS TO AUTHORS

The answer of criteria checklist for new manuscript peer-review : 1. Yes. The title reflects the main subject of the manuscript. 2. Yes. The abstract summarizes and reflects the work described in the manuscript 3. Yes. The key words reflect the focus of the manuscript. 4. Yes. The manuscript adequately describes the background, present status and significance of the study. 5. Yes. The manuscript describes methods in adequate detail. 6. Yes. The research objectives are achieved by the experiments used in this study. The contributions that the study has made for research progress in this field are retrospective analysis of experiences in 5 children with PPF who underwent ERCP as treatment. Because PPF is a rare disease and the case report of this disease is limited, so this research adds to the experience in the field of PPF therapy and can be considered for the further research with larger samples in the future. 7. Yes. The manuscript interprets the findings adequately and appropriately, highlighting the key points concisely, clearly and logically. Yes. The findings and their applicability to the literature are stated in a clear and definite manner. Yes. The discussion is accurate. Yes. It discusses the paper's scientific significance to clinical practice sufficiently. 8. Yes. The diagrams and tables are sufficient, good quality and appropriately illustrative of the paper contents. There is no figure in this paper. 9. Yes. The manuscript meets the requirements of biostatistics 10. Yes. The manuscript meets the requirements of use of SI units 11. Partially the manuscript cites appropriately the latest. All of the cites are important and authoritative references in the introduction and discussion sections. No. The author doesn't self-cite, omit, incorrectly cite and/or over-cite references. 12. Yes. The manuscript well, concisely and coherently organized and presented. Yes. The style, language and grammar is accurate and appropriate. 13. Yes. The author prepared the manuscript according to the appropriate research methods and reporting. 14. Yes. The manuscript met the



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requirements of ethics. Specific comments to the authors:

- The original findings of this manuscript are preliminary comparison of surgery and endoscopic treatment of PPF by summarizing the treatment results and prognosis of seven children treated in author's hospital.
- The new hypotheses that this study proposed are ERCP treatment is not inferior than surgical treatment for patients with PPF. Even better because it is noninvasive.
- The new findings of this study are (1) The success rate of ERCP treatment (80%) was slightly lower than that of surgical treatment (100%), which may have been due to the small number of patients. (2) the recovery time was shorter after ERCP than after surgical treatment.
- The quality and importance of this manuscript are ERCP has the advantages of a simple operation, minimal trauma, few complications, and rapid recovery than surgical treatment, especially for children.
- Yes. The conclusions appropriately summarize the data that this study provided.
- The limitations of the study and its findings are the limited number of the patients.
- The future directions of the topic described in this manuscript are study to compare the cost-effectiveness and long-term results of ERCP and surgery.
- The issues that remain to be solved are the effectiveness of ERCP as the first-choice treatment for PPF in children (by doing research in larger number of patients).



RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Doctor

Reviewer's Country/Territory: Bulgaria

Author's Country/Territory: China

Manuscript submission date: 2020-05-31

Reviewer chosen by: Jin-Lei Wang

Reviewer accepted review: 2020-08-06 03:44

Reviewer performed review: 2020-08-17 18:44

Review time: 11 Days and 14 Hours

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|---------------------------------|--|
| Scientific quality | <input checked="" type="checkbox"/> Grade A: Excellent [] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish |
| Language quality | <input checked="" type="checkbox"/> Grade A: Priority publishing [] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection |
| Conclusion | <input checked="" type="checkbox"/> Accept (High priority) [] Accept (General priority) [] Minor revision [] Major revision [] Rejection |
| Peer-reviewer statements | Peer-Review: <input checked="" type="checkbox"/> Anonymous [] Onymous Conflicts-of-Interest: [] Yes <input checked="" type="checkbox"/> No |

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