

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 56607

Title: Novel endoscopic papillectomy for reducing postoperative adverse events (with videos)

Reviewer's code: 04031726

Position: Editorial Board

Academic degree: MD

Professional title: Attending Doctor, Doctor, Research Fellow, Surgeon

Reviewer's Country/Territory: Brazil

Author's Country/Territory: China

Manuscript submission date: 2020-05-14

Reviewer chosen by: AI Technique

Reviewer accepted review: 2020-05-14 23:52

Reviewer performed review: 2020-05-15 19:59

Review time: 20 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input 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 Grade E: Do not publish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 type="checkbox"/> Minor revision <input checked="" 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

Safe and feasible novel endoscopic papillectomy for reducing postoperative adverse events: comparison of a novel method and conventional method is a retrospective study that compared two ampullectomy techniques. I will do my assessment by topic. Initial considerations: 1) First of all, the article is not formatted according to the rules of the Journal. I recommend authors to read the "Instructions for authors" and adapt the article. 2) Second, I recommend the authors to resubmit the article because it was not possible to open the videos. So I can't evaluate them. I will make my assessment only according to the text. Introduction: 1) Your introduction looks like a discussion, this is too big! Reduce that and switch to the topic of discussion. 2) "As the name implies, duodenal papillary lesions are lesions that invade the papillary area of the duodenum" You start the article in a very rude way. Improve this for your readers. MATERIALS AND METHODS 1) Was a sample calculation performed? 2) Why was the sample limited from 2016 to 2018 if we are in 2020? Was the technique abandoned? 3) How were the groups chosen? Why have only 23 patients undergone a new technique? 4) Were the procedures always performed by the same endoscopist? 5) "enzyme inhibitors and nutrition were given through intravenous infusion" What drugs are these? Make it clear in the article. RESULTS 6) What are "basic characteristics" between groups? DISCUSSION 7) "Postoperative adverse events have been a difficult issue for endoscopists and have been the main cause of death from endoscopic papillectomy in clinical practice since the wide application of EP." What is the rate of adverse events and mortality reported in the literature? Include the data. 8) "As indicated in the introduction, perforation is one of the most critical and dangerous adverse events of EP that may lead to severe intra-abdominal infection and even death." As I said, your introduction is very big. Leave only the basics and bring the rest of the information to the

discussion instead of quoting your introduction in your own discussion. 9) “. It could also prevent bacteria from invading the wound surface or into ducts ” What bacteria are you talking about? From the intestinal flora itself? Is there evidence in the literature that this happens? Do patients not use antibiotics after the procedure? 10) “Active trypsin then erodes new vessels and granulation tissue on the wound surface, leading to postoperative bleeding and pancreatitis.” Does tissue corrosion cause pancreatitis? Where in the literature is this described? Cite the article. 11) “Furthermore, as a protein substance, the inactive trypsinogen that covers the wound surface can act as a kind of” nutrition cover ”and, together with fibrin glue, can protect and promote the healing process” Is this an assumption or are there studies in the literature to prove it? Quote and discuss. 12) “Furthermore, as a protein substance ...” “Furthermore, this protective cover ...” Do not use repeated words in the text. Improve that. 13) “Furthermore, this protective cover can also prevent pathogenic microorganisms from invading into the PD and can reduce the risk of pancreatitis.” Again, is this an assumption or are there studies in the literature that prove this to happen? Make the discussion and quote. 14) “We sprayed fibrin glue on the closed wound to protect the wound surface” How does this fibrin glue work? Do you have several companies? Which was used? 15) Is there any evidence between this fibrin glue vs hemospray for this type of procedure? Include this in the discussion. Conclusion: 16) “The novel method for endoscopic papillectomy is a safe and effective treatment for reducing postoperative adverse events.” “Due to the limitations of this study, further research is necessary to verify the claims.” First, you say it is effective and then you say you need more articles to confirm it? First, you cannot conclude that the new method is effective and safe in reducing adverse events since this is a retrospective, skewed, non-randomized article and you only tested 23 patients. You can suggest that the new technique has this potential but say, no. Abstract: 17) “Hence, this novel method for endoscopic papillectomy is an effective and feasible therapy for



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reducing postoperative adverse events.” From what was explained in item 16, you can never conclude this. Fix it.

RE-REVIEW REPORT OF REVISED MANUSCRIPT

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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 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 type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
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SPECIFIC COMMENTS TO AUTHORS



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The authors endeavored to answer the questions, but there are still changes to be made.

- Your new introduction doesn't even have a reference! 1) "Tumors of the main duodenal papilla are rare, with a prevalence of only 0.04% to 0.12% in autopsy studies." Include the reference of these studies. 2) "potentially develop into adenocarcinoma through the adenoma-adenocarcinoma sequence." Include the reference. 3) "Pancreaticoduodenectomy and endoscopic papillectomy (EP) are the main treatments of PA, and EP is more recommended for benign papillary lesions because of its advantages over open surgery, including less trauma, satisfying treatment outcomes, fewer adverse events and lower cost." Reference 4) ", endoscopists also found intraoperative and postoperative adverse events." Did endoscopists find adverse events intraoperatively? What did you mean by that? A surgeon who is also an endoscopist? I think you should review that sentence. 5) "These included frequent bleeding" Frequent bleeding? Are you sure about this? What is the reference for this? 6). "In our over 15-year experience with EP application, bleeding and perforation occurred in several patients postoperatively, and these events did lead to extremely difficult results that needed invasive surgical intervention or even resulted in death, although this was not common." We do not want to know your experience in introducing the topic, in introducing your article. If you want to express it, include it in the speech. 7) At the end of your introduction you must include your objective. Make that clear. MATERIALS AND METHODS 8) You did not make it clear in the text that your study is not blind randomized. Make that clear. 9) You did not make it clear in the text that there was a sample calculation and how you arrived at this number. Explain the limitations of the study as to why you have not divided the groups correctly. 10) You describe the procedure and, without any division, describe the statistical tests. Leave it separate. Results 11) "and they were grouped by novel or conventional methods" Make it clear to your readers how the division between groups was made, who chose, and how it happened. Discussion 12) "Thus, for a long time,

open or minimally invasive surgeries, such as pancreaticoduodenectomy, have been regarded as the only removal strategy for PAs” Reference. 13) “The drawbacks of these invasive surgeries are obvious” 14) “Postoperative adverse events, which occur in around 29% patients,” Include the reference. 15) “Accordingly, the adverse event rates of the novel method were significantly lower than those of previous studies” What previous studies? Include references. They may even be obvious to you, but not to your readers. Do not be rude. 16) “In light of these results” This is a scientific article, please do not bring popular forms of language. 17) “Hemospray, a hemostatic powder that can rapidly solidify and form an adhesive layer on contact with weak bases, such as water and blood.” I suggest substantiating with the reference: PMID: 31803822 18) “Hemospray is not commercially available in China now, but considering its efficacy, we still look forward to testing it in our novel EP procedure in the future.” Although there is no hemospray in china, is there an article in the literature relating its use and comparing it with glue? Make that clear in your article. With cyanoacrylate, there will be no comparison as it is an injectable method and not a surface method. 19) “In conclusion, the novel method for endoscopic papillectomy is a potentially safe and effective treatment for reducing postoperative adverse events. It isolates the contact between bile and pancreatic juice with a bile stent, protects the wound surface with metal clips and fibrin glue, and can improve the postoperative condition of patients. Due to the limitations of this study, further research is necessary to verify the claims. ” Once again, in your conclusion, you “affirm” what cannot be affirmed and end by saying that you need more studies. I repeat: The conclusion answers your objective and that's it. You cannot say that it is a safe method because your study is retrospective, with selection bias, not randomized, with group location bias. His study "suggests", never claims. Final considerations: - In video 1, at 01:52, data appears in the lower-left corner. - The Article has several grammatical and spelling errors. The English Certificate is BEFORE the author's review. Resubmit for



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further review and provide the new certificate.