

PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 64887

Title: Hyperbaric Oxygen Therapy as a Complementary Treatment for Radiation Proctitis: Useless or Useful? – A Literature Review.

Reviewer's code: 03270754

Position: Editorial Board

Academic degree: MD, PharmD, PhD

Professional title: Assistant Professor, Associate Professor

Reviewer's Country/Territory: China

Author's Country/Territory: Portugal

Manuscript submission date: 2021-02-25

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-02-28 07:13

Reviewer performed review: 2021-03-09 04:57

Review time: 8 Days and 21 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 Grade E: Do not publish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 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

SPECIFIC COMMENTS TO AUTHORS

1.This research focused on Hyperbaric Oxygen Therapy as a Complementary Treatment for Radiation Proctitis: Useless or Useful? – A Literature Review., after check the pubmed, there are although have some review about Radiation Proctitis and HBOT, but this paper systemic and Convincing. 2. But still have some places I think need to revised 3. Firstly, structure of review I think not like this: Background then go into discussion part. 4. Figure 3 was blank, see nothing. Have found 2020 published some article such as Hyperbaric Treatment Of Radiation Proctitis. Cooper JS, Hanley ME.2020 Aug 15. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2021 Jan-.PMID: 30726028, I think need cited.

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Name of journal: World Journal of Gastroenterology

Manuscript NO: 64887

Title: Hyperbaric Oxygen Therapy as a Complementary Treatment for Radiation Proctitis: Useless or Useful? – A Literature Review.

Reviewer's code: 05353938

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Doctor, Surgeon, Surgical Oncologist

Reviewer's Country/Territory: China

Author's Country/Territory: Portugal

Manuscript submission date: 2021-02-25

Reviewer chosen by: Ya-Juan Ma

Reviewer accepted review: 2021-03-17 02:30

Reviewer performed review: 2021-03-22 02:47

Review time: 5 Days

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

SPECIFIC COMMENTS TO AUTHORS

Comments to the Author: Overall, it is a good review about the RP and Hyperbaric Oxygen Therapy. But I have some suggestions as follows 1. In the section "Background" Page 4 the Paragraph 5th, "The diagnosis is confirmed by endoscopic examination". But in clinic, the diagnosis is not all confirmed by endoscopic examination, it also according to imaging examination such as CT/MRI and histopathological examination, ect. 2. In the section "Background" Page 4 the Paragraph 6th, the first sentence is not rigorous enough, "Almost all patients" are mainly for the patients during pelvic malignancy radiation. 3. In the section "Background" Page 4 the Paragraph 7th, "A cumulative dose of RT <45 Gy is associated with a lower risk of late RT lesion, in contrast to what is observed for doses >70 Gy", Is there any literature support? Also, in the Paragraph 8th, "There are other factors related to the patient that may be associated with a higher risk of RP". And in other sections, appropriate citations should be added. Please check the full text. 4. The security of HOBT is not described in this paper. 5.

Table 1, Vienna Rectoscopy Score are the common used scoring system for severity for radiation proctitis including several aspects for Mucosal congestion, Telangiectasia, Ulceration, Stenosis, Necrosis. As described in the literature "Endoscopic scoring of late rectal mucosal damage after conformal radiotherapy for prostatic carcinoma" Doi: 10.1016/s0167-8140(99)00173-5. And histopathologic changes used in the calculation of the radiation injury score designed by Langberg et al also can be used in clinic, As described in the literature "Tolerance of rat small intestine to localized single dose and fractionated irradiation, doi: 10.3109/02841869209083871." 6. Table 2, as for the response rate, the main symptoms or the severity of the RP patients in each study can be added in this table. 7. In Figure 3, the treatment strategies for acute or chronic RP are quite different, which should be reflected in this figure and in the section of "Radiation

Proctitis Treatment". In addition, it is not very accurate to divide the symptomatic into the following three categories. This category of the abdominal complications can be included in the first two categories.