



### PEER-REVIEW REPORT

**Name of journal:** World Journal of Gastrointestinal Endoscopy

**Manuscript NO:** 68537

**Title:** Role of endoscopic ultrasound guided fine needle aspiration/biopsy (EUS-FNA/B) in the evaluation of intra-abdominal lymphadenopathy due to tuberculosis(TB)

**Reviewer's code:** 03727100

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Assistant Professor, Doctor

**Reviewer's Country/Territory:** Japan

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

**Manuscript submission date:** 2021-05-26

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-05-27 08:50

**Reviewer performed review:** 2021-05-30 13:03

**Review time:** 3 Days and 4 Hours

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 Grade E: Do not publish            |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



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

Thank you for giving us reviewing the manuscript entitled “Role of endoscopic ultrasound guided fine needle aspiration/biopsy (EUS-FNA/B) in the evaluation of intra-abdominal lymphadenopathy due to tuberculosis (TB)”. My comments are following. 1. (Page 2, Line 9) Would you please add the full spell of “AFB”? 2. What is the difference between patients who were performed FNB and patients who were performed FNA? 3. Would you please add the figure of hetero-echoic nodes? 4. (Page 12, Line 13) Citation number 7 is a space away from the previous sentence. 5. This manuscript was written about EUS-FNAB in the evaluation of lymphadenopathy due to TB. Is the result of EUS-FNAB for abdominal lymphadenopathy (Table 1) necessary? If it is necessary, final diagnoses should be included. 6. Patients whose mediastinal lymph nodes were punctured are included in Table 2. In the title, “abdominal lymphadenopathy” is written. 7. Would you please add the data of FNAB needles or gauge of FNAB needles, the rate of FNB, sensitivity, specificity, accuracy in Table 2? 8. How should EUS-FNAB be performed to acquire sufficient specimens for histologically diagnosing TB? (For example, all patients who were not histologically diagnosed as TB were performed EUS-FNA.) If possible, would you please add the description about that in discussion?