

## PEER-REVIEW REPORT

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

**Manuscript NO:** 73411

**Title:** Development and validation of a prediction model for moderately severe and severe acute pancreatitis in pregnancy

**Provenance and peer review:** Unsolicited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 05240100

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

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

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

**Manuscript submission date:** 2021-11-20

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-12-18 09:53

**Reviewer performed review:** 2021-12-18 10:51

**Review time:** 1 Hour

<b>Scientific quality</b>	<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 Grade E: Do not publish
<b>Language quality</b>	<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
<b>Conclusion</b>	<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
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No



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**Peer-reviewer  
statements**

Peer-Review: [☒] Anonymous [☐] Onymous  
Conflicts-of-Interest: [☐] Yes [☒] No

## **SPECIFIC COMMENTS TO AUTHORS**

Thank you for the opportunity for reviewing this manuscript. I consider the question raised of utmost importance; however, I have concerns regarding the clinical value of the findings. My comments are, as follows: - I understand that the authors tried to increase the statistical power by increasing event number (using MSAP + SAP instead of SAP alone), but the choice of this composite outcome is unlucky, as having MSAP has far not as worse prognosis as having SAP. In my opinion, it would be more relevant to predict the composite of SAP + mortality + fetal death or a something similar outcome. -The definition of CV failure can overestimated the incidence of true CV failure. E.g., need for vasopressor support may be a better option. -An external validation would be desirable. This would increase sample size as well. -A recommend adding negative and positive predictive values as well and set the test either for confirmation of a favorable or for an exclusion of an unfavorable outcome, to increase clinical applicability. -Using labs within 48 hours after admission is a wide range as a lot can change during this period.

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**Reviewer's code:** 03805084

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Professor

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

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

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**Reviewer accepted review:** 2022-01-03 18:22

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**Review time:** 1 Hour

<b>Scientific quality</b>	<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
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<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**Peer-reviewer  
statements**

Peer-Review: [ ☐ ] Anonymous [ ☒ ] Onymous

Conflicts-of-Interest: [ ☐ ] Yes [ ☒ ] No

## **SPECIFIC COMMENTS TO AUTHORS**

The severity of acute pancreatitis in pregnancy (APIP) is a rare condition which is known to be associated with a higher risks of maternal and fetal death. There are few studies that focus on APIP causes, course and/or severity prediction. Although there are numerous publications on the use and comparison of various severity stratification systems for acute pancreatitis in non-pregnant subjects, the authors have identified an interesting niche for the research. The team has identified four predictors developed and established a prediction nomogram model for pregnancy patients with moderate and severe acute pancreatitis. This model achieved good concordance indexes and may help guide doctors in the administration of APIP. This is a nicely presented and methodologically correct study, which would be interesting to many readers. I missed the comparison of the new nomogram system performance with other worldwide known prognostification systems, i.e. BISAP, Ranson, MODS and/or single biochemical markers (CRP, IL-6, etc.).

## RE-REVIEW REPORT OF REVISED MANUSCRIPT

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**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

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

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

**Manuscript submission date:** 2021-11-20

**Reviewer chosen by:** Han Zhang (Online Science Editor)

**Reviewer accepted review:** 2022-02-19 07:57

**Reviewer performed review:** 2022-02-19 08:01

**Review time:** 1 Hour

<b>Scientific quality</b>	<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
<b>Language quality</b>	<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
<b>Conclusion</b>	<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
<b>Peer-reviewer</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous



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Conflicts-of-Interest: [ ☐ ] Yes [ ☒ ] No

## **SPECIFIC COMMENTS TO AUTHORS**

My comments were addressed by the authors, I have no further questions.