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PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

Manuscript NO: 75228

Title: Interventional strategies in infected necrotizing pancreatitis: Indications, timing,

and outcomes

Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05189300 Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Chief Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: Japan

Manuscript submission date: 2022-01-20

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-01-20 07:21

Reviewer performed review: 2022-01-21 08:43

Review time: 1 Day and 1 Hour

Scientific quality	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [Y] Accept (General priority) [] Minor revision [] Major revision [] Rejection
Re-review	[Y]Yes []No



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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

statements Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Treatment of acute pancreatitis (AP) has undergone considerable changes in the past 10 years—ie, the introduction of a multidisciplinary, tailored approach including minimally invasive endoscopic, radiological, and surgical interventions for infected pancreatic and peripancreatic necrosis and improvements in critical care have reduced both morbidity and mortality. This paper provides an over view of current evidence on the indications, timing and outcomes of interventional strategies in in Accurate and early diagnosis fected necrotizing pancreatitis. It is important for clinicians to selected the optimal approach for dealing with necrotizing pancreatitis, and thus improve patients' prognosis. Major issues: In the abstract, the authors stated that "Accurate and early diagnosis of NP and associated complications, as well as state-of-the-art therapy are imminent in order to improve prognosis." However, no reporting on the diagnosis was found in the manuscript. I would advise the authors add evidences on this topic. There were some grammatical and spelling errors in the paper. I would recommend a thoroughly re-checking on the manuscript.



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Reviewer's code: 03026587 Position: Peer Reviewer

Academic degree: FRCS, FRCS (Gen Surg), MBChB

Professional title: Senior Lecturer, Surgeon

Reviewer's Country/Territory: United Kingdom

Author's Country/Territory: Japan

Manuscript submission date: 2022-01-20

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-01-20 20:12

Reviewer performed review: 2022-01-24 23:46

Review time: 4 Days and 3 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [Y] Accept (General priority) [] Minor revision [] Major revision [] Rejection
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it is a good review on management of pancreatitis and highlight of the step up approach in the management of this important and difficult topic. the article emphasis the importance of MDT approach. the inclusion of many different studies and trails is well summarised and put into focus with this review. thus the quality of the manuscript is good, and with such a good summary provide a new concepts, highlighted in the conclusion. This article address a key problem which is the timing as well as best management approach for both AP and INP. the diagram, flow charts, and table are well illustrated. the main problem addressed is the high mortality rate of INP that needs future research on how to reduce it. overall the article summarise and add a concise guidance on steps of management of INP that can be adapt in clinical practice. some of the references lack DOI need to be addressed. a few spelling mistake and some grammar need to be improved