Baishideng Publishing Group

7041 Koll Center Parkway, Suite 160, Pleasanton, CA 94566, USA
Telephone: +1-925-399-1568
E-mail: bpgoffice@wjgnet.com
https://www.wjgnet.com

PEER-REVIEW REPORT

Name of journal: *World Journal of Gastrointestinal Surgery*

Manuscript NO: 76406

Title: Predictors of difficult endoscopic resection of submucosal tumors originating from the muscularis propria layer at the esophagogastric junction

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03026925
Position: Editorial Board
Academic degree: MD, PhD
Professional title: Chief Doctor
Reviewer's Country/Territory: Japan
Author's Country/Territory: China

Manuscript submission date: 2022-03-30

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-03-30 11:59

Reviewer performed review: 2022-04-08 13:23

Review time: 9 Days and 1 Hour

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish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) [ ] Accept (General priority) [ ] Minor revision [Y] Major revision [ ] Rejection
Re-review	[ ] Yes [Y] No

Baishideng Publishing Group

7041 Koll Center Parkway, Suite 160, Pleasanton, CA 94566, USA
Telephone: +1-925-399-1568
E-mail: bpgoffice@wjgnet.com
https://www.wjgnet.com

Peer-reviewer statements	Peer-Review: [Y] Anonymous [ ] Onymous Conflicts-of-Interest: [ ] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

This retrospective study investigated the predictors of difficult endoscopic resection for SMTs from the MP layer at the EGJ. The endoscopic treatment of SMT near the EGJ can be a difficult choice to make, and although the number of cases is not that large, the content should be of interest to readers. There are some comments below. 1. In the regression analysis, the number of explanatory variables is large compared to the number of cases, making interpretation of the results difficult. If possible, any opinions of statistical experts should be consulted. 2. Please indicate whether closure of defect were performed in all cases and the success rate. 3.Please indicate in the table any cases that required postoperative emergency surgery. 4. It is important to show how well the actual shape matched the preoperative EUS findings (regular or irregular). 5. Please indicate the surgeon's experience with each of the three techniques. 6. Since these cases include some of the larger sized cases, please indicate how they will be collected. Also, please discuss how to deal with cases that cannot be collected in one piece. 7. Please provide a definition of “complete resection”.

Baishideng Publishing Group

7041 Koll Center Parkway, Suite 160, Pleasanton, CA 94566, USA
Telephone: +1-925-399-1568
E-mail: bpgoffice@wjgnet.com
https://www.wjgnet.com

PEER-REVIEW REPORT

Name of journal: *World Journal of Gastrointestinal Surgery*

Manuscript NO: 76406

Title: Predictors of difficult endoscopic resection of submucosal tumors originating from the muscularis propria layer at the esophagogastric junction

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05911820
Position: Peer Reviewer
Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2022-03-30

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-04-03 05:51

Reviewer performed review: 2022-04-10 14:12

Review time: 7 Days and 8 Hours

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [ ] Grade C: Good [Y] 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) [ ] Accept (General priority) [ ] Minor revision [ ] Major revision [Y] Rejection
Re-review	[ ] Yes [Y] No

Baishideng Publishing Group

7041 Koll Center Parkway, Suite 160, Pleasanton, CA 94566, USA
Telephone: +1-925-399-1568
E-mail: bpgoffice@wjgnet.com
https://www.wjgnet.com

Peer-reviewer statements	Peer-Review: [Y] Anonymous [ ] Onymous Conflicts-of-Interest: [ ] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

The authors present the treatment of SMT at the esophago-gastric junction was completed with minimally invasive and without major complications by STER, EFTR, and ESD. The fact that we were able to summarize these cases and list the nature of their tumors will be helpful for future SMT treatment at the EGJ. On the other hand, however, the comparison of the three different techniques is difficult to be helpful because of the differences in the target and site of the tumors. Overall, there are several problems.

Major comments: 1 Did the authors perform EUS-FNA on SMT in this study? If the tumor is a leiomyoma, the need for resection is basically low, and if it is a GIST, if the possibility of en bloc resection is low, we think it is better to consider other treatment methods. 2 Please mention the size of GIST alone and the rate of en bloc resection. 3 It is easy to understand that large tumor size and its irregular shape are factors that make SMT in EGJ difficult to resect. The method defines tumor size as 10 cm or smaller, and I think 10 cm was the largest resection size in the retrospective analysis. Would the authors consider resection in the future at any size? Please explain. 4 As SMT resection involves an incision in the muscle layer or in all layers, closure of the wound after resection is sometimes difficult. Please explain in detail whether you were able to close the incision completely in each case and technique, and the method of closure. 5 This study of endoscopic resection is a bridge study to surgical operation. Please describe the SMT in EGJ for which surgical operation rather than endoscopic resection is recommended. Minor comments: 1 There are many miss spellings (main text, Tables) leimyoma → leiomyoma 2 Please correct the miss spellings Table 1 mos? Table 3,4,5 Predominant extralumina → Predominant extraluminal

Baishideng Publishing Group

7041 Koll Center Parkway, Suite 160, Pleasanton, CA 94566, USA
Telephone: +1-925-399-1568
E-mail: bpgoffice@wjgnet.com
https://www.wjgnet.com

PEER-REVIEW REPORT

Name of journal: *World Journal of Gastrointestinal Surgery*

Manuscript NO: 76406

Title: Predictors of difficult endoscopic resection of submucosal tumors originating from the muscularis propria layer at the esophagogastric junction

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 00038617
Position: Editorial Board
Academic degree: MD, PhD
Professional title: Assistant Professor
Reviewer's Country/Territory: Japan
Author's Country/Territory: China

Manuscript submission date: 2022-03-30

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-04-01 11:02

Reviewer performed review: 2022-04-10 15:42

Review time: 9 Days and 4 Hours

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

Baishideng Publishing Group

7041 Koll Center Parkway, Suite 160, Pleasanton, CA 94566, USA
Telephone: +1-925-399-1568
E-mail: bpgoffice@wjgnet.com
https://www.wjgnet.com

Peer-reviewer statements	Peer-Review: [Y] Anonymous [ ] Onymous Conflicts-of-Interest: [ ] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

In this study, the authors performed a retrospective study to compare three procedures, ESD, STER, and EFTR, in the endoscopic treatment of submucosal tumors (SMTs) located at EGJ. This study was conducted by an expert at a single center specializing in endoscopic therapy, and 90 cases were enrolled. According to their results, they concluded that SMTs with large size and irregular shape were independent predictors for difficult endoscopic resection. As they described, there have been no report comparing endoscopic resection approaches for the treatment of SMTs localized in EGJ, so this study is certainly meaningful and interesting. This paper is very well written and is assessed as worthy of publication. Comment (1) Why was there no stenosis of EGJ after endoscopic treatment? Please comment and discuss about this issue. The authors should indicate whether tumor circumference affected or did not affect stenosis.