

PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Surgery

Manuscript NO: 81177

Title: Endoscopic ultrasound-guided portal pressure gradient measurement in

managing portal hypertension

Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 00071220 Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Professor

Reviewer's Country/Territory: Japan

Author's Country/Territory: Indonesia

Manuscript submission date: 2022-10-28

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-10-29 06:21

Reviewer performed review: 2022-10-29 06:32

Review time: 1 Hour

Scientific quality	[Y] Grade A: Excellent [] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish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



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

SPECIFIC COMMENTS TO AUTHORS

I had the opportunity to review a paper "Endoscopic Ultrasound Portal Pressure Gradient Measurement and Its Impact in Managing Portal Hypertension", and I found very interesting. There is no problem to publish the manuscript.



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Manuscript NO: 81177

Title: Endoscopic ultrasound-guided portal pressure gradient measurement in

managing portal hypertension

Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06215370 Position: Peer Reviewer Academic degree: MD

Professional title: Chief Doctor, Professor

Reviewer's Country/Territory: China

Author's Country/Territory: Indonesia

Manuscript submission date: 2022-10-28

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-10-31 07:20

Reviewer performed review: 2022-11-01 09:20

Review time: 1 Day and 2 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [] Grade C: Good [] Grade D: Fair [Y] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [] Grade B: Minor language polishing [Y] 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	[Y] Yes [] No



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

SPECIFIC COMMENTS TO AUTHORS

Thanks for sharing the author's insights on this cutting-edge topic. There are several suggestions. 1. Authors mentioned "Another issue in clinical practice is that not all cases might have accurate portal pressure measurement through this indirect measurement procedure." It is suggested to add specific reasons and supplementary references. 2. Authors mentioned "Possible contraindications, such as allergic reaction to contrast agent, cardiac arrhythmia during catheter insertion in transjugular route, and risk of bleeding in patient with very low platelet count or prolonged international normalized ratio (INR)". This is not a completed sentence. Authors may consider rephrasing it. 3. Many statements in this manuscript lack necessary references, and authors are advised to check the whole manuscript carefully and make some additions. Including but not limited to "Possible contraindications, such as allergic reaction to contrast agent, cardiac arrhythmia during catheter insertion in transjugular route, and risk of bleeding in patient with very low platelet count or prolonged international normalized ratio (INR).", "In the early stage, CSPH condition can be prevented with early medication.", "However, whether EUS evaluation is needed in the first setting in all patients with liver cirrhosis for deep varices evaluation is still debatable", "Last but not least, EUS-PPG measurement can be performed and then followed by EUS-guided cyanoacrylate injection for large or deep gastroesophageal as well as isolated gastric varices". 4. The part of "Endoscopic Ultrasound Portal Pressure Gradient Measurement in Portal Hypertension" has too few contents, with only 10 references. There is a lot of research and progress that needs to be included. The present manuscript may not sufficiently reveal the authors' full understanding and experiences about this established topic "Endoscopic Ultrasound



Portal Pressure Gradient Measurement and Its Impact in Managing Portal Hypertension". The following contents are still lacking, such as new ideas, new directions, present difficulties, and future direction of this current topic.



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Manuscript NO: 81177

Title: Endoscopic ultrasound-guided portal pressure gradient measurement in

managing portal hypertension

Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06255079 Position: Peer Reviewer Academic degree: MSc

Professional title: Lecturer

Reviewer's Country/Territory: Ethiopia

Author's Country/Territory: Indonesia

Manuscript submission date: 2022-10-28

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-11-01 12:33

Reviewer performed review: 2022-11-07 12:25

Review time: 5 Days and 23 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) [] Accept (General priority) [Y] Minor revision [] Major revision [] Rejection
Re-review	[]Yes [Y]No



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

SPECIFIC COMMENTS TO AUTHORS

Endoscopic Ultrasound Portal Pressure Gradient Measurement and Its Impact in Managing Portal Hypertension Reviewer's comments. Title. Does the title reflect the main subject/hypothesis of the manuscript? • Yes. Abstract. Does the abstract summarize and reflect the work described in the manuscript? • Yes, the abstract cover the main aspect of the work Key words. Do the key words reflect the focus of the manuscript? o It is recommended to use MeSH headings as the keywords. Please correct, if possible. Introduction. Does the manuscript adequately describe the background, present status and significance of the study? • The Introduction of the manuscript has tried to provide the background and information relevant to the study but it has some • Even though several literatures are mention it's a little bit bulky to read, and lacks coherency and flow. It will better if the authors summaries it in a table, mentioning the country the study, the sample size, and types of the study (i.e. experimental/observational) • An essential detail of the case that allows to a useful conclusion is mentioned. • The discussion part looks relevant, clear and concise. • Key concepts are listed. • Relevant literatures are well discussed, however strengths and limitations in your approach to this case is not mentioned, please add the possible limitations and strengths of your approach to the case. Illustrations and tables. Are the figures, diagrams and tables sufficient, good quality and appropriately illustrative of the paper contents? Do figures require labeling with arrows, asterisks etc., better legends? • Figures are in a good quality. Biostatistics. Does the manuscript meet the requirements of biostatistics? • N/A Units. Does the manuscript meet the requirements of use of SI units? • Yes. References. Does the manuscript cite



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appropriately the latest, important and authoritative references in the introduction and discussion sections? Does the author self-cite, omit, incorrectly cite and/or over-cite references? • The references of the manuscript has to follow the referencing style guidelines of the journal. Quality of manuscript organization and presentation. Is the manuscript well, concisely and coherently organized and presented? Is the style, language and grammar accurate and appropriate? • Some part of the discussion has grammatical errors and should be addressed. Ethics statements. For all manuscripts involving human studies and/or animal experiments, author(s) must submit the related formal ethics documents that were reviewed and approved by their local ethical review committee. Did the manuscript meet the requirements of ethics? • There is no any ethical or any other concern raised. The approval has been granted.



RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: World Journal of Gastrointestinal Surgery

Manuscript NO: 81177

Title: Endoscopic ultrasound-guided portal pressure gradient measurement in

managing portal hypertension

Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06215370 Position: Peer Reviewer Academic degree: MD

Professional title: Chief Doctor, Professor

Reviewer's Country/Territory: China

Author's Country/Territory: Indonesia

Manuscript submission date: 2022-10-28

Reviewer chosen by: Jing-Jie Wang

Reviewer accepted review: 2022-12-23 08:23

Reviewer performed review: 2022-12-23 09:15

Review time: 1 Hour

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 [] Grade B: Minor language polishing [Y] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [] Minor revision [] Major revision [Y] Rejection
Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous



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statements

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

SPECIFIC COMMENTS TO AUTHORS

1. It is incomprehensible and unacceptable that the reviewers' comments have yet to be answered as requested, although the authors have made some modifications. 2. There are still many syntax errors. 3. It is recommended not to omit "0" in the description of the p-value.