

## PEER-REVIEW REPORT

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

**Manuscript NO:** 85455

**Title:** ERCP-related early perforations: A study of effects of procedure duration, complexity and endoscopist experience

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

**Peer-review model:** Single blind

**Reviewer's code:** 04696174

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Chief Physician

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

**Author's Country/Territory:** United States

**Manuscript submission date:** 2023-04-28

**Reviewer chosen by:** Geng-Long Liu

**Reviewer accepted review:** 2023-06-05 10:56

**Reviewer performed review:** 2023-06-11 16:18

**Review time:** 6 Days and 5 Hours

Scientific quality	<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 Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation

<b>Scientific significance of the conclusion in this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
<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 checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

## SPECIFIC COMMENTS TO AUTHORS

This study provides valuable insights into the risk factors associated with ERCP-related perforations. The use of a national endoscopic database adds to the strength of the study, and the findings are relevant to clinical practice. My comments and concerns are as follows: 1. The perforation rate in this manuscript is significantly lower (0.14%) than in the three studies cited (reference articles 4, 5, and 17), where the rates were 0.45%, 0.72%, and 0.39%, respectively. Could the authors clarify the reason for this substantial difference? 2. Considering the low occurrence of perforation in this study, can we conclude that the study has sufficient statistical power to support its findings? 3. The authors mentioned in the discussion that the prolonged duration of the procedure and sphincterotomy were factors linked to perforation in this study. However, there is no statistical analysis supporting sphincterotomy as a risk factor in this manuscript. The authors only included age category, endoscopist ERCP volume quartile, fluoroscopy time, and total procedure time in the multivariate regression analysis. They concluded that only prolonged total procedural time among the parameters studied is associated with perforations.

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**Reviewer's code:** 03259026

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Doctor, Professor

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

**Author's Country/Territory:** United States

**Manuscript submission date:** 2023-04-28

**Reviewer chosen by:** Geng-Long Liu

**Reviewer accepted review:** 2023-06-19 04:56

**Reviewer performed review:** 2023-06-27 02:54

**Review time:** 7 Days and 21 Hours

Scientific quality	<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
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
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	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

## SPECIFIC COMMENTS TO AUTHORS

The manuscript entitled "ERCP-related early perforations: A study of effects of procedure duration, complexity, and endoscopist experience" has been reviewed. While exploring the factors related to the ERCP-related early perforation, the authors analyzed the data on endoscopist and center procedural volumes, ERCP duration and complexity on the occurrence of early perforations. There are some comments regarding the manuscript: (1) In the result section of summary, the following sentence is found: "Total procedure duration in minutes was 60.1 29.9 vs. 40.33 23.5 (Perf vs. NoPerf, p0.001)", which shows the total procedure duration in Perforation group was 60.1 29.9 In the result section of the main text, the following sentence is found: "Total procedure duration in minutes was 40.33 23.5 vs. 60.1 29.9 (Perf vs. NoPerf, p0.001)", which shows the total procedure duration in Perforation group was 40.33 23.5 The statement of the same result has been contradictory in the abstract and the main text. Please clarify it. (2) It would be better to describe the type of the perforations encountered during the ERCP procedure, whether it is duodenal perforation or peri-ampullary perforation or bile duct injury related perforation caused by guidewire



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