



## PEER-REVIEW REPORT

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

**Manuscript NO:** 90077

**Title:** Ileal collision tumor associated with gastrointestinal bleeding: A case report and review of literature

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

**Peer-review model:** Single blind

**Reviewer's code:** 02936184

**Position:** Editorial Board

**Academic degree:** FRCP, MBChB, MD, MSc

**Professional title:** Consultant Physician-Scientist, Professor

**Reviewer's Country/Territory:** United Kingdom

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

**Manuscript submission date:** 2023-11-22

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2023-12-02 12:14

**Reviewer performed review:** 2023-12-10 20:48

**Review time:** 8 Days and 8 Hours

<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 Grade E: Do not publish
<b>Novelty of 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 novelty
<b>Creativity or innovation of this manuscript</b>	<input checked="" type="checkbox"/> Grade A: Excellent <input 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 type="checkbox"/> Grade A: Priority publishing <input checked="" 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 type="checkbox"/> Yes <input checked="" 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**

Dear authors Thank you for your great effort in writing this rare case report. The case report is well-written with few comments and mistakes that need to be corrected: 1) In the case summary: (Based on imaging studies) - You did not mention which imaging studies, it was better to say: based on CT scan Findings. (apical mucosa revealed a JP with evidence of rupture and bleeding) - you did not mention the histopathology of the second component (lipoma). 2) IN the section; Further diagnostic work-up: Hemostasis: this is not a treatment modality, you should be a bit specific about the treatment delivered and if the patient received blood transfusion or not. Subsequent gastroscopy : it is definitely subsequent colonoscopy (NOT GASTROSCOPY). 6cm from the terminal ileum: should be 6cm from ileo-caecal valve. Pathological examination: better to say Histopathological examination. No mention about how many biopsies were taken and whether the biopsies were taken from top part only or both parts. The mucosa of the top of the lesion reported JP: No mention about the histopathological examination of the loer part of the lesion (lipoma). 3) In the section of TREATMENT: Exclusion of other potential sources of gastrointestinal bleeding - no mention about how this was excluded? was



**Baishideng  
Publishing  
Group**

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

gastroscopy performed? Located at the ileocaecal valve??? should be 6 cm away from ICV Modified ESD: no clarification of the procedure and how it differed from standard ESD 4) In the section of OUTCOME AND FOLLOW-UP Postoperative pathology: There is no surgical intervention, better to say; Histopathological examination of the endoscopic biopsies. 5) At the section of DISCUSSION: We successfully performed ESD under endoscopy to remove a massive-sized collision tumor without any adverse events occurring postoperatively, providing a new case reference value for ESD treatment of huge small intestinal tumors. I think the word (under endoscopy) should be deleted. The word (a massive-sized ) is overestimation and the same for (Huge small intestinal tumour), no need for such exaggeration.