



**ESPS PEER-REVIEW REPORT**

**Name of journal:** World Journal of Gastroenterology

**ESPS manuscript NO:** 25963

**Title:** “Does Massive Intraabdominal Free Gas Require Surgical Intervention?”

**Reviewer’s code:** 00050556

**Reviewer’s country:** Greece

**Science editor:** Ya-Juan Ma

**Date sent for review:** 2016-03-27 13:55

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input type="checkbox"/> No	

**COMMENTS TO AUTHORS**

**CRITIQUE** This manuscript is very interesting and should be published after major revision has been made. It is a case report of a patient with abdominal pain that was proved to be caused by pneumatosis cystoides intestinalis, and was managed conservatively. The following changes should be done in the paper: 1.Abstract. The abstract is too long for a case report. From the 2nd sentence: “First we considered... as opposed to ascites.” should be omitted. 2. Abstract. 2nd line. ...free gas bilaterally in the subdiaphragmatic spaces. (in plural) 3.Abstract. 3rd line. ...CT also showed massive free gas with portal gas. It should be changed as: CT also showed massive free gas in the peritoneal cavity with portal venous gas. 4.Core tips. The first sentence “The present case taught... surgical intervention” should be omitted. 5.Introduction. It is also long. The section “PCI has been...has not been determined” (4th line to 11th line) can be omitted and added in the Discussion. It is not necessary to report the pathogenesis of the disease in the Introduction. 6. The authors use the term portal gas throughout the text, whereas the right term used in the literature is portal vein gas. 7. The Discussion is also very long; therefore it should be shortened to 2/3 of all. 2nd page of Discussion, line 3: Therefore, clinicians should... in bounded time. should be omitted. 2nd page of



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Dicussion, line 1 to line 14 (...five could survive without surgical resection) needs shortening. 3rd and 4th page. The authors analyze their dilemma how to treat this patient very extensively. They should shorten this part in about one half of the text. In the end they should add a paragraph with information from the literature on the prognosis of these cases with PCI treated conservatively. Will they follow up this patient and for how long?