

PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Surgery

Manuscript NO: 32163

Title: Perforation associated with endoscopic submucosal dissection for duodenal neoplasm without a papillary portion

Reviewer's code: 00227386

Reviewer's country: United Kingdom

Science editor: Jin-Xin Kong

Date sent for review: 2016-12-30

Date reviewed: 2017-01-03

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 checked="" 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 checked="" 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 checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

This paper presents an unique comparison of endoscopic mucosal dissection with endoscopic submucosal dissection in the management of non-ampullary duodenal tumours. It is well written but the English needs amending in a few places. In the Introduction on page 7 the relevance of the two sentences in the first paragraph beginning with :- "Primary adenocarcinoma represents" and ending with " ranges from 35% to 85%" is not clear and needs re-writing. In the Conclusion at the end of Abstract on page 4 mention needs to be made of the recommendation made at the end of page 19 that laparoscopic and endoscopic cooperative surgery (LECS) should be considered for tumours exceeding 20mm. At the end of the section on "Endoscopic Resection Techniques" on page11 mention needs to be made as to how delayed perforations were recognised. In Table 2 the "Ages" should be omitted as not really relevant. Table 3 is not mentioned in the text and should be omitted.



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PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Surgery

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Title: Perforation associated with endoscopic submucosal dissection for duodenal neoplasm without a papillary portion

Reviewer's code: 01488602

Reviewer's country: Romania

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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 checked="" type="checkbox"/> Grade C: Good	<input checked="" 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 checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

correct retrospective single center study, however brings useful data; please elaborate more in discussion chapter on the factors leading to complications in your center
language correction mandatory