



## PEER-REVIEW REPORT

**Name of journal:** *Artificial Intelligence in Gastrointestinal Endoscopy*

**Manuscript NO:** 74547

**Title:** Artificial intelligence in colorectal cancer screening in patients with inflammatory bowel disease

**Provenance and peer review:** Invited manuscript; externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 05737072

**Position:** Peer Reviewer

**Academic degree:** PhD

**Professional title:** Assistant Professor

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

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

**Manuscript submission date:** 2022-01-06

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-01-20 08:06

**Reviewer performed review:** 2022-01-20 08:21

**Review time:** 1 Hour

<b>Scientific quality</b>	<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 Grade E: Do not publish
<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 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
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### SPECIFIC COMMENTS TO AUTHORS

1. The abstract should be written more clearly highlighting the major contributions of the paper. 2. The organization of the Introduction section is very unsatisfactory, and it is very messy and hard to read. Thus, this section needs rewriting in order to make it crisp and the main points of the research methodology should be mentioned clearly. This will help the readers to appreciate the novelty of the research. 3. Improve the literature review. Add several pieces of research in 2019 and complete table 1. Moreover, the following references can be used: Designing a sustainable closed-loop supply chain network of face masks during the COVID-19 pandemic: Pareto-based algorithms. *Journal of Cleaner Production*, 130056. Developing a sustainable operational management system using hybrid Shapley value and Multimooraa method: case study petrochemical supply chain. *Environment, Development and Sustainability*, 1-30. A Covering Tour Approach for Disaster Relief Locating and Routing with Fuzzy Demand. *International Journal of Intelligent Transportation Systems Research*, 18(1), 140-152. Sustainable supply chain network design using products' life cycle in the aluminum industry. *Environmental Science and Pollution Research*, 1-25. Hybrid artificial intelligence and robust optimization for a multi-objective product portfolio problem Case study: The dairy products industry. *Computers & industrial engineering*, 137, 106090. A comprehensive model of demand prediction based on hybrid artificial intelligence and metaheuristic algorithms: A case study in dairy industry. An integrated approach based on artificial intelligence and novel meta-heuristic algorithms to predict demand for dairy products: a case study. *Network: Computation in Neural Systems*, 1-35. 4. Improve the conclusion by indicating core achievement in your research, main



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managerial insights, and some other novel future outlooks.



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**Reviewer's code:** 05758135

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

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

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<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No



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<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
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### **SPECIFIC COMMENTS TO AUTHORS**

This is a mini review. The authors summarize the application of artificial intelligence in gastrointestinal endoscopy and related inflammatory bowel disease and screening for colorectal cancer. Overall, the paper fits the journal well, but major revisions are required before being accepted. 1. Although the title of the article is artificial intelligence in colorectal cancer screening, the related application of artificial intelligence has not been written in depth. 2. The length of each section needs to be paid attention to. For example, discussion in section 'APPLICATION OF AI IN GASTROINTESTINAL ENDOSCOPY' has to be simplified. Simplifying the Introduction section is also recommended. 3. A section to discuss the disadvantages of traditional medicine and the benefits of AI in gastrointestinal endoscopy is recommended. 4. Simply citing existing literature such as in Section 'APPLICATION OF AI IN PATIENTS WITH IBD' is not enough, what are your in-depth comments and discussions? 5. Also, a schematic figure to show AI in screening for colorectal cancer is required. Terms including deep learning, machine learning, AI and some related screening features are recommended to be added in the figure.



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**Reviewer's code:** 05469117

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Adjunct Professor, Deputy Director

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

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### **SPECIFIC COMMENTS TO AUTHORS**

Thank you for giving me a chance to review this manuscript title Artificial intelligence in colorectal cancer screening in patients with inflammatory bowel disease .In this review, the authors aimed to show the benefits and innovations of AI in the screening of CRC in patients with IBD. My major comments are as following: The paper pays too much attention to the description of phenomena and lacks discussion on mechanism, which may be that the benefits of readers are unsteady and limited.But I believe that after the corresponding modification. It will be a good manuscript: 1. On page four, second paragraph,"Detection of adenomas during colonoscopy is dependent on the examining endoscopist, with studies reporting a variation of 7%–53% among different physicians[5]. Failure to detect neoplastic lesions can be associated with the development of CRC in the interval between two colonoscopies[4]."The reasons for different doctors' inconsistent diagnosis are diverse, and the description here is inaccurate. 2.On page six, line 20,"This method is known to be more effective in detecting lesions in the right colon because the distal part of the colon, especially the sigmoid colon, may have some blind spots, reducing the efficiency of the CADe system. "Why is the sigmoid colon blind spot? 3.The reference format is incomplete, such as the references 2 missing content.