

PEER-REVIEW REPORT

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Title: Bleeding with the Artificial Heart: Gastrointestinal Hemorrhage in CF-LVAD patients

Reviewer's code: 00057306

Reviewer's country: Italy

Science editor: Ya-Juan Ma

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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 checked="" type="checkbox"/> Grade B: Very good | <input checked="" 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"/> Duplicate publication | |
| <input type="checkbox"/> Grade D: Fair | <input type="checkbox"/> Grade C: A great deal of language polishing | <input type="checkbox"/> Plagiarism | <input type="checkbox"/> Rejection |
| <input type="checkbox"/> Grade E: Poor | | <input checked="" type="checkbox"/> No | <input checked="" type="checkbox"/> Minor revision |
| | <input type="checkbox"/> Grade D: Rejected | 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

dear authors very interesting review on an emergent and challenging situation; no doubts about the first descriptive part and on pathophysiology but I would enrich the last part speaking about risk factors for bleeding in patients with LVAD (long use of LVAD, right ventricular dysfunction, post-LVAD >30%), possibility of hormonal therapy, octreotide therapy; also literature about the possibility to perform diagnosis and endoscopic therapy on upper and lower endoscopy should be detailed and I would add the few papers on diagnosis and therapy on the small bowel pathology in LVAD recipients (videocapsule endoscopy and therapy by device-assisted enteroscopy)