

## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Clinical Cases*

**Manuscript NO:** 88383

**Title:** Spontaneous gastric hematoma as a rare cause of acute abdomen: A case report

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

**Peer-review model:** Single blind

**Reviewer's code:** 02904354

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Academic Editor, Associate Chief Physician, Associate Professor,  
Deputy Director

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

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

**Manuscript submission date:** 2023-09-23

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2023-09-25 14:41

**Reviewer performed review:** 2023-09-29 06:17

**Review time:** 3 Days and 15 Hours

Scientific quality	<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 Grade E: Do not publish
Novelty of this manuscript	<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
Creativity or innovation of this manuscript	<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 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

An interesting case. Here are some comments as follows. 1. Some sentences are wrong in grammar and punctuation. In the 5th line of page 4, the authors said "History of present illness", which should be revised as "History of present of illness".

In the last line of page 6, the authors said "...and physical examination...", which should be revised as "...and physical examination...". 2. The authors should give the full names of MSCT and GIST when they are first mentioned. 3. In the treatment section, proton pump inhibitors (PPI) were mentioned. The authors should further explain the name and dosage of the medication used, and the PPI medication treatment for patients after discharge should also be explained in details. 4. Only one young male patient cannot infer whether it is a reasonable conclusion for most patients to receive conservative treatment in a safe manner. 5. The patient should share his perspective on the treatment he received. 6. In the discussion section, the authors should add the advantages and limitations of managing this case. 7. How do you determine the nature of this lesion as a hematoma instead of other diseases? The authors did not perform any histology examination. 8. Has the patient undergone ultrasound



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guided biopsy before?

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**Reviewer's code:** 03262127

**Position:** Peer Reviewer

**Academic degree:** MD, PhD

**Professional title:** Surgeon

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

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

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**Reviewer chosen by:** Yu-Lu Chen

**Reviewer accepted review:** 2023-11-03 09:11

**Reviewer performed review:** 2023-11-15 21:29

**Review time:** 12 Days and 12 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
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	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

## SPECIFIC COMMENTS TO AUTHORS

pain in left flank which which occurred two weeks prior (Case Presentation) - please remove one word "which" History of present illness - illness is right. He stated that he vomited... (Case Presentation) - "The patient stated..." is much better. His vital parameters... (Case Presentation) - "The vital parameters..." is better. 10 x 10 cm in diameter (Case Presentation) - "10 cm in diameter" is right. Digital anal examination (Case Presentation) - "Digital rectal examination" is a more appropriated term. Initial blood count showed slightly lower hemoglobin (123 g/L, 138 - 175 being normal for him) and hematocrit (0,367 L/L, 0,415-0,530 being normal for him) (Case Presentation) - the words "being normal for him" (used twice) are not very suitable for a scientific article. To be corrected. measuring approximately 15 cm x 11 cm x 9 cm in diameters (Figure 1.a, b, c). (Imaging) - "measuring approximately 15x11x9 cm (Figure 1. a-c)" is right. The word "diameters" is absolutely inappropriate here. He was discharged with instructions for a soft diet and PPI therapy (Treatment) - "The patient was..." is better. examination (Outcome) - examination is right. pseudo aneurysmal (Discussion) - pseudoaneurysmal is right. Five of seven patients, including their, were treated

surgically with procedures such as total or subtotal gastrectomies, wedge gastric resections, gastrectomies with roux en y anastomosis [4]. (Discussion) - the words "gastrectomies with roux en y anastomosis" need to be removed as excessive. severely bleeding GIST or peptic ulcers patients (Discussion) - "...peptic ulcer patients" is better.

Ref. 4 - Author name is absent, Title is incomplete. To be corrected. Fig. 1 (a-c) - there is no information about the imaging method in the Figure Legend. Please add it. In my personal experience, a significant part of "spontaneous" intra-abdominal hematomas in young men are in fact post-traumatic, but this is impossible to prove, since many patients, for one reason or another, lie to doctors, hiding the fact of trauma. I encourage authors to write a sentence or two on this topic in the Diagnostics section. In the Discussion section, the authors write about the use of analgesics, while in the Treatment section there is no information about this. If analgesics were used, it is better to indicate the regimen and duration of use (the same applies to PPI drugs). In fact, the treatment was minimal. Therefore, it would be interesting for the common reader if in the Discussion section you covered in more detail the conservative treatment of gastric hematomas (not necessarily spontaneous!) from the point of view of pharmacological support (hemostatics? anticoagulants? other drugs?) and diet, using current literature sources.