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315-321 Lockhart Road,
Wan Chai, Hong Kong, China

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 2154

Title: Unexpected endoscopic full-thickness resection of a duodenal neuroendocrine tumor

Reviewer code: 00005145

Science editor: Song, Xiu-Xia

Date sent for review: 2013-02-01 15:42

Date reviewed: 2013-02-04 18:43

| CLASSIFICATION | LANGUAGE EVALUATION | RECOMMENDATION | 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 checked="" type="checkbox"/> Grade B: minor language polishing | <input type="checkbox"/> Existed | <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"/> No records | <input type="checkbox"/> Rejection |
| <input checked="" type="checkbox"/> Grade D (Fair) | <input type="checkbox"/> Grade D: rejected | BPG Search: | <input type="checkbox"/> Minor revision |
| <input type="checkbox"/> Grade E (Poor) | | <input type="checkbox"/> Existed | <input type="checkbox"/> Major revision |
| | | <input type="checkbox"/> No records | |

COMMENTS TO AUTHORS

THE PAPER IS LARGELY REPETITIVE AND REDUNDANT. THUS , IT SHOULD BE CONDENSED INTO A LETTER , LIMITING THE IMAGES TO FIGURES 2 AND 5 .



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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 2154

Title: Unexpected endoscopic full-thickness resection of a duodenal neuroendocrine tumor

Reviewer code: 00070058

Science editor: Song, Xiu-Xia

Date sent for review: 2013-02-01 15:42

Date reviewed: 2013-02-04 23:08

| CLASSIFICATION | LANGUAGE EVALUATION | RECOMMENDATION | 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"/> Existed | <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"/> No records | <input type="checkbox"/> Rejection |
| <input type="checkbox"/> Grade D (Fair) | <input type="checkbox"/> Grade D: rejected | BPG Search: | <input type="checkbox"/> Minor revision |
| <input type="checkbox"/> Grade E (Poor) | | <input type="checkbox"/> Existed | <input type="checkbox"/> Major revision |
| | | <input type="checkbox"/> No records | |

COMMENTS TO AUTHORS

This case report describes a duodenal perforation associated with EMR of a submucosal duodenal carcinoid. The authors point out that the risk of perforation with EMR is high. The article would be strengthened if the authors review the literature and comment on whether the benefits of EMR outweigh the risks in an asymptomatic patient such as this. How would the risks/benefits differ with surgery, or with surveillance? Otherwise, the article would benefit from editing for English language and grammar.



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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 2154

Title: Unexpected endoscopic full-thickness resection of a duodenal neuroendocrine tumor

Reviewer code: 01164511

Science editor: Song, Xiu-Xia

Date sent for review: 2013-02-01 15:42

Date reviewed: 2013-02-05 20:45

| CLASSIFICATION | LANGUAGE EVALUATION | RECOMMENDATION | 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"/> Existed | <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"/> No records | <input type="checkbox"/> Rejection |
| <input type="checkbox"/> Grade D (Fair) | <input type="checkbox"/> Grade D: rejected | <input type="checkbox"/> Existed | <input checked="" type="checkbox"/> Minor revision |
| <input type="checkbox"/> Grade E (Poor) | | <input type="checkbox"/> No records | <input type="checkbox"/> Major revision |

COMMENTS TO AUTHORS

In this manuscript, Hatogai et al reported a case report of unexpected endoscopic mucosal resection of a duodenal Neuroendocrine tumor. Major comments: 1) Care report description. Please, provide additional information about this patient: indication for first endoscopy, occurrence of tumor related-symptoms (carcinoid syndrome), etc. 2) A peculiar characteristic of NET is the production of several cytokines/hormones resulting in a number of symptoms. Please, see: -Faggiano A, et al. Everolimus is an active agent in medullary thyroid cancer: a clinical and in vitro study. J Cell Mol Med. 2012 Jul;16(7):1563-72. -Vitale G, et al. Effects of type I interferons on IGF-mediated autocrine/paracrine growth of human neuroendocrine tumor cells. Am J Physiol Endocrinol Metab. 2009 Mar;296(3):E559-66 -Vitale G, et al. IFN-beta is a highly potent inhibitor of gastroenteropancreatic neuroendocrine tumor cell growth in vitro. Cancer Res. 2006 Jan 1;66(1):554-62. A short sentence should be added on this topic in the first paragraph of the Discussion section. 3) Page 4, first paragraph of the Discussion: "... in the new World Health Organization Classification of 2010 ...". Reported references (5 and 6) regard papers published in 2007 and 2011. Please, clarify this apparent discrepancy.



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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 2154

Title: Unexpected endoscopic full-thickness resection of a duodenal neuroendocrine tumor

Reviewer code: 00004297

Science editor: Song, Xiu-Xia

Date sent for review: 2013-02-01 15:42

Date reviewed: 2013-02-06 16:44

| CLASSIFICATION | LANGUAGE EVALUATION | RECOMMENDATION | CONCLUSION |
|---|--|-------------------------------------|--|
| <input type="checkbox"/> Grade A (Excellent) | <input checked="" type="checkbox"/> Grade A: Priority Publishing | Google Search: | <input checked="" type="checkbox"/> Accept |
| <input checked="" type="checkbox"/> Grade B (Very good) | <input type="checkbox"/> Grade B: minor language polishing | <input type="checkbox"/> Existed | <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"/> No records | <input type="checkbox"/> Rejection |
| <input type="checkbox"/> Grade D (Fair) | <input type="checkbox"/> Grade D: rejected | <input type="checkbox"/> Existed | <input type="checkbox"/> Minor revision |
| <input type="checkbox"/> Grade E (Poor) | | <input type="checkbox"/> No records | <input type="checkbox"/> Major revision |

COMMENTS TO AUTHORS

The paper by Hatogai and co-workers entitled Unexpected endoscopic full-thickness resection of a duodenal neuroendocrine tumor is an excellent case report presenting the advantages and pitfalls by using the EMR. The paper is well written and does not need any significant changes.



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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 2154

Title: Unexpected endoscopic full-thickness resection of a duodenal neuroendocrine tumor

Reviewer code: 00722837

Science editor: Song, Xiu-Xia

Date sent for review: 2013-02-01 15:42

Date reviewed: 2013-02-14 22:53

| CLASSIFICATION | LANGUAGE EVALUATION | RECOMMENDATION | 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 checked="" type="checkbox"/> Grade B: minor language polishing | <input type="checkbox"/> Existed | <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"/> No records | <input type="checkbox"/> Rejection |
| <input type="checkbox"/> Grade D (Fair) | <input type="checkbox"/> Grade D: rejected | BPG Search: | <input type="checkbox"/> Minor revision |
| <input type="checkbox"/> Grade E (Poor) | | <input type="checkbox"/> Existed | <input type="checkbox"/> Major revision |
| | | <input type="checkbox"/> No records | |

COMMENTS TO AUTHORS

I think the title may be changed to "A successful endoscopic management of an unexpected endoscopic full thickness resection of a duodenal neuro-endocrine tumour." Discussion should be about unexpected full thickness resection and its management, and not be about neuro-endocrine neoplasms. So in the first paragraph of the discussion, the first sentence may be shortened and second and third sentence may be omitted. It is worth mentioning whether the patient was kept in the hospital after the procedure and when he was discharged home.