



# BAISHIDENG PUBLISHING GROUP INC

8226 Regency Drive, Pleasanton, CA 94588, USA

Telephone: +1-925-223-8242

Fax: +1-925-223-8243

E-mail: bpgoffice@wjgnet.com

http://www.wjgnet.com

## ESPS PEER REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**ESPS manuscript NO:** 13555

**Title:** CT-Guided Percutaneous Core Needle Biopsy in the Diagnosis of Pancreatic Tumors.

**Reviewer code:** 02544224

**Science editor:** Su-Xin Gou

**Date sent for review:** 2014-08-28 10:34

**Date reviewed:** 2014-09-02 21:58

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"/> Existing	<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"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

### COMMENTS TO AUTHORS

The authors give a report about CT-guided percutaneous core-needle biopsies of pancreatic lesions. This procedure seems to be safe and should widely used in the clinical for diagnosis of pancreatic cancer. In general the method is valuable for confirm pancreatic cancer along with pathological testing. So authors should provide pathological and molecular figures for the novelty of the manuscript, such as kras mutation. Most references are old and recent five year references should be included.



### ESPS PEER REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**ESPS manuscript NO:** 13555

**Title:** CT-Guided Percutaneous Core Needle Biopsy in the Diagnosis of Pancreatic Tumors.

**Reviewer code:** 02440537

**Science editor:** Su-Xin Gou

**Date sent for review:** 2014-08-28 10:34

**Date reviewed:** 2014-09-03 05:33

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"/> Existing	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input checked="" 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		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

### COMMENTS TO AUTHORS

This study retrospectively evaluated CT-guided percutaneous biopsies for solid pancreatic lesions in 103 patients. The work would be much more interesting when compared with the ecoendoscopy with biopsy of solid pancreatic lesions in that time period (january 2012 and september 2013). - Describe whether the complications were related to the type of needle used. - Describe the evolution of complications. - What changes in laboratory refers test findigs? Does the analytical was performed on all patients after puncture? - Add in methods references to the hydrodissection and pneumodissection - Add the feature of the 7 patients who had previously made Ecoendoscopy. - Was there more than one puncture in any patient? Add this data. - In the discussion it is said that there Most studies Have Shown That This procedure has> 90% diagnostic accuracy for pancreatic lesions. Add a table with the author, year, number of patient characteristics. What difference does this work with previous studies? - Not correct this sentence. Delete or modify "The advantages of CT-guided biopsy ecoendoscopy over ..." - Add in the number of methods by ecoendoscopy punctures in the same period of time in their hospital.



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## ESPS PEER REVIEW REPORT

**Name of journal:** World Journal of Gastroenterology

**ESPS manuscript NO:** 13555

**Title:** CT-Guided Percutaneous Core Needle Biopsy in the Diagnosis of Pancreatic Tumors.

**Reviewer code:** 02544664

**Science editor:** Su-Xin Gou

**Date sent for review:** 2014-08-28 10:34

**Date reviewed:** 2014-09-04 20:41

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"/> Existing	<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"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

### COMMENTS TO AUTHORS

This manuscript shows us a useful technique. It is safe and with high diagnostic accuracy. But there are still some problems. 1. Try to analysis the reason of complications, whether it related to the position of the tumor or the needle size. 2. It better to have a table to show the Patients' characteristics and the p value. 3. Whether this technique will cause any tumor seeding? 4. Why some procedures were not directly accessible?



**ESPS PEER REVIEW REPORT**

**Name of journal:** World Journal of Gastroenterology

**ESPS manuscript NO:** 13555

**Title:** CT-Guided Percutaneous Core Needle Biopsy in the Diagnosis of Pancreatic Tumors.

**Reviewer code:** 02544377

**Science editor:** Su-Xin Gou

**Date sent for review:** 2014-08-28 10:34

**Date reviewed:** 2014-09-02 11:22

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"/> Existing	<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"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

**COMMENTS TO AUTHORS**

The authors described the usefulness of CT-guided needle biopsy for diagnosing pancreatic tumors. As the article is well written with sufficient sample size and acceptable procedure / results, it deserves to be published in WJGE. I have some recommendation that this paper should be accepted with minor revisions.

#1 As commented by the authors, oncologically, the most worrisome complication in needle biopsy procedure is tumor seeding. Were there any suspicious cases with tumor seeding accompanied by CT-guided needle biopsy in the case series? Even if there was no such case, it should be described in the results section.

#2 The authors stressed that tissue samples obtained by CNB is more appropriate for histological examination than those of FNA. To demonstrate this issue visually, pictures of biopsied specimen should be added in the Figures