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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Surgery

ESPS manuscript NO: 27323

Title: Eosinophilic ascites: A diagnostic and therapeutic challenge

Reviewer's code: 00041858

Reviewer's country: United States

Science editor: Fang-Fang Ji

Date sent for review: 2016-05-25 10:04

Date reviewed: 2016-05-27 03:46

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 type="checkbox"/> Grade B: Very good	<input 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 checked="" type="checkbox"/> Grade D: Fair	<input checked="" 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 type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
		BPG Search:	<input checked="" 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

The manuscript on eosinophilic ascites is not well-written and thus, not acceptable for publication in a peer-reviewed journal. The authors must provide a more thorough review of the published literature. Instead of using the term "eosinophilic gastroenteritis", "eosinophilic infiltration of the gastrointestinal tract" is more correct since the condition can also affect the esophagus and the colon. The authors must divide their review into three section, focusing on predominantly subserosal disease, transmural disease, and mucosal disease. The review must include published experience regarding presentation, diagnosis, workup, treatment, and complications. It must also be stated that the disease can be lethal. The manuscript must undergo a major revision.



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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Surgery

ESPS manuscript NO: 27323

Title: Eosinophilic ascites: A diagnostic and therapeutic challenge

Reviewer's code: 00503601

Reviewer's country: Singapore

Science editor: Fang-Fang Ji

Date sent for review: 2016-05-25 10:04

Date reviewed: 2016-05-25 16:50

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> [Y] Accept
<input type="checkbox"/> [Y] Grade B: Very good	<input type="checkbox"/> [Y] 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"/> [] Grade C: A great deal of language polishing	<input type="checkbox"/> [] Duplicate publication	<input type="checkbox"/> [] Rejection
<input type="checkbox"/> [] Grade D: Fair	<input type="checkbox"/> [] Grade D: Rejected	<input type="checkbox"/> [Y] No	<input type="checkbox"/> [] Minor revision
<input type="checkbox"/> [] Grade E: Poor		BPG Search:	<input type="checkbox"/> [] Major revision
		<input type="checkbox"/> [] The same title	
		<input type="checkbox"/> [] Duplicate publication	
		<input type="checkbox"/> [] Plagiarism	
		<input type="checkbox"/> [Y] No	

COMMENTS TO AUTHORS

Simple and well written case report of a rare condition. Will serve as a reminder of the condition. The article can be strengthened tremendously by reviewing all available cases in the literature to create a "series" of published cases to better understand the epidemiology and profile of the disease

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Surgery

ESPS manuscript NO: 27323

Title: Eosinophilic ascites: A diagnostic and therapeutic challenge

Reviewer's code: 00503929

Reviewer's country: Brazil

Science editor: Fang-Fang Ji

Date sent for review: 2016-05-25 10:04

Date reviewed: 2016-06-02 09:54

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" 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"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" 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 type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
		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

This is a case report accompanied by a survey of the literature on a rare variant presentation of eosinophilic gastroenteritis. As such, it is interesting, and may raise awareness of this condition among clinicians. I have a few comments on the characterization of this case. 1. "She admitted to the recent use of green tea and increased consumption of nuts in her diet." This information in itself is not useful to the reader, as it is unclear how that would support the diagnosis. If it is meant to suggest a diagnosis of exposure to allergens, it should be discussed together with the negative results in allergy tests. 2. "Past medical history was remarkable for recurrent allergic bronchitis". This information does suggest previous exposure to allergens, but is inconsistent with the results of allergy tests. This should be discussed. 3. "Laboratory examination revealed peripheral eosinophilic leukocytosis with 52% eosinophils (total leukocyte count 22,900 cells/ mm³) and no immature myeloid precursors". This is a huge eosinophilia and compatible with hypereosinophilic syndrome and several parasitic diseases caused by helminths, not all of which can be ruled out on the basis of stool examinations. The authors should discuss to what extent all helminth infections prevalent in the region of origin of this patient were ruled out as a cause of eosinophilia. Furthermore, it is unclear



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how immature myeloid precursors would be characterized in this study (no criteria, morphological, cytochemical or immunophenotypical, are provided, to enable the reader to form an opinion on that).

4. I find the photomicrographs of eosinophils in ascites fluid (Figure 2) insufficient in some respects, and confusing in others. According to the figure caption, the larger picture was obtained at 10x magnification, which would suggest eosinophils are very large cells (they are not); according to the same caption, the insert was obtained at 100x, which would make eosinophils appear ten times larger in any dimension, although they look exactly the same size as the ones in the larger picture. It is not stated what staining was used for the larger picture, while the insert is said to be stained by May-Grunwald-Giemsa. If, as I suspect, both views have the same magnification, and used the same staining procedure, I cannot see why two views are provided. Background lighting is also very different in the two views, for some reason that eludes me, although it should, in principle, be brighter in a low-magnification view (i. e., in the larger picture), which is not the case. Furthermore, in my experience, human eosinophils in Giemsa-related stains show coarse granules which stain orange-red. I did not see such coarse granules, and cytoplasmic color is not orange-red in the pictures, so the only reason I could recognize them as eosinophils is the presence in most of them of a symmetrically bilobed nucleus with a thin chromatin link. I wonder why no effort was made to include a high magnification (1000x) with the characteristic granules, since demonstration that they really are eosinophils is central to the paper.



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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Surgery

ESPS manuscript NO: 27323

Title: Eosinophilic ascites: A diagnostic and therapeutic challenge

Reviewer's code: 00735706

Reviewer's country: Malaysia

Science editor: Fang-Fang Ji

Date sent for review: 2016-05-25 10:04

Date reviewed: 2016-06-05 10:11

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
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		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

The manuscript deals with a case report and a review on an important condition and is well written.