

ESPS Peer-review Report
Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 7852

Title: RDW to platelet ratio New and promising prognostic marker in acute pancreatitis

Reviewer code: 00009064

Science editor: Su-Xin Gou

Date sent for review: 2013-12-04 16:40

Date reviewed: 2013-12-10 01:05

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)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

The time that elapsed between acute pain episode and hospitalisation is not mentioned and hence it is not possible to appreciate how soon change occurs in RPR. Secondly, it appears to be a nonspecific epiphenomenon of any acute illness and not specific to acute pancreatitis. Simple hematocrit estimation may provide the same information, which has also been suggested as a marker of severity of acute pancreatitis. Did you compare that with RPR? Finally it is necessary to compare RPR with some other standard well accepted marker of severity eg SIRS.

ESPS Peer-review Report
Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 7852

Title: RDW to platelet ratio New and promising prognostic marker in acute pancreatitis

Reviewer code: 00035938

Science editor: Su-Xin Gou

Date sent for review: 2013-12-04 16:40

Date reviewed: 2014-02-15 15:16

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)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

General comments: Cetinkaya et coworkers propose the ratio of the red cell distribution width and the platelets count as novel parameter to predict mortality in acute pancreatitis. The study design remains unclear whether it is a prospective or retrospective observational study. Increased RDW seems to be an unspecific finding in severe systemic illness.

Specific comments: Explain RDW in title and abstract. The concept of aggressive fluid resuscitation has been controversially discussed during recent years. What evidence do we have that intervention improves the outcome in acute pancreatitis? The positive predictive value of 26% is low, can you comment? Conclusion: How can careful monitoring improve survival? Unfortunately, the language renders the understanding of the paper sometimes difficult. It would be helpful to compare the prognostic performance of RPR with other established scores for predicting acute pancreatitis outcome such as Ranson, Glasgow, MOSS, SIRS, APACHE-II, BISAP, or CRP.