

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 13133

Title: Comparison of scoring systems in predicting the severity of acute pancreatitis

Reviewer code: 02526196

Science editor: Ya-Juan Ma

Date sent for review: 2014-08-08 09:33

Date reviewed: 2014-09-30 19:12

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	<input type="checkbox"/> Existing	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

Ms: ESPS Manuscript NO: 13133 Authors: Joon Hyun Cho, Tae Nyeun Kim, Hyun Hee Chung, Kook Hyun Kim Title: Comparison of scoring systems in acute pancreatitis

GENERAL COMMENTS: (1) The importance of the research and the significance of the research contents: This paper focuses on the evaluation of usefulness of different scoring systems in predicting the severity of acute pancreatitis (AP). Authors compared retrospectively analyzed the collected clinical database from patients with AP in their institution between January 2011 and December 2012. The Ranson, APACHE-II, and BISAP scores and CTSI of all patients were calculated and compared. Authors concluded that the APACHE-II scoring system seems to have the highest accuracy in assessment of the severity and outcome of AP; however various scoring systems showed similar predictive accuracy for severity of AP. Unique models are needed in order to achieve further improvement of prognostic accuracy. The importance in this paper is that authors provide some useful information about different scoring system in AP, however authors could not point any one of them is better in evaluating AP. (2) The novelty and innovation of the research: This is not a new study; however authors provide some useful data from Korea about different scoring system in the evaluation of AP and enrich the database of scoring systems in predicting the severity of AP. (3) Presentation and readability of the manuscript: The presentation of the manuscript is ok and provides some information about the different scoring system in the evaluation of AP. However, is the repetition of results between the description in the text and tables can be avoided; the readability

of the manuscript will be increased. Nevertheless the manuscript is good for the readership of WJG, especially for the gastroenterologist and AP patients, even relevant for the normal population.

SPECIFIC COMMENTS: Title: The title accurately reflects the major topic and contents of the study.

Abstract: The description of aim, material and methods, result and conclusion sections is Ok.

Introduction: It is well written.

Material and methods: This section clearly described the patient data, equipment used, standard of diagnosis and statistical analysis.

Results: This section clearly described the results obtained from the study. However, the description and tables are repeated each other. It is suggested to reduce the repeat description in the text and just make brief description.

Page 7, line 13: What mean is about abbreviation of NPO?

Discussion: The discussion is well written.

Page 10, last line: What mean is about abbreviation of PPV and NPV?

References: The references are appropriate, relevant, and updated.

Tables and figures: Tables and figures are appropriately presented.

CLASSIFICATION OF THE MANUSCRIPT grades B. **LANGUAGE EVALUATION** Grade B.

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 13133

Title: Comparison of scoring systems in predicting the severity of acute pancreatitis

Reviewer code: 02441458

Science editor: Ya-Juan Ma

Date sent for review: 2014-08-08 09:33

Date reviewed: 2014-08-21 21:09

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 type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> No records	<input checked="" type="checkbox"/> Rejection
<input checked="" type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Existing	<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 manuscript, which I reviewed with interest, is a comparative study of the most common scores used for early prediction of severity of acute pancreatitis. The study includes a moderate number of patients with acute pancreatitis. The authors evaluated CRP, APACHE-II, BISAP, and CTSI score and compared their usefulness in prediction of severity of acute pancreatitis. The study has, however, some deficiencies which render this manuscript unacceptable for publication in this form. Comments: 1.Of 161 patients, 10 had underlying chronic pancreatitis. These patients, in fact, suffered exacerbation of chronic pancreatitis, and not acute pancreatitis. These patients should be excluded from the study. I would be reluctant to include the patients with recurrent acute pancreatitis either because in these patients AP usually run a less severe course. 2.There were 3 deaths in this study: 2 patients within the severe AP group (due to persistent organ failure) and 1 patient from the moderate/mild AP group (due to extensive pancreatic necrosis). The cause of death in this patient requires further explanation because extensive necrosis usually leads to organ failure what would mean a crossover to the severe AP group. 3.The correlations with NPO and pethidine should be removed as irrelevant.

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 13133

Title: Comparison of scoring systems in predicting the severity of acute pancreatitis

Reviewer code: 00039630

Science editor: Ya-Juan Ma

Date sent for review: 2014-08-08 09:33

Date reviewed: 2014-09-22 20:08

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"/> 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	<input type="checkbox"/> Existing	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

This paper deals with the comparison of various scoring system in acute pancreatitis (AP) to predict the severity of AP according to the revised Atlanta Classification. There were only limited studies about revised Atlanta Classification. This paper was written very well. The sample size was enough to reach a conclusion and this results can help physician understanding the clinical usefulness of existing scoring systems for AP. The used study parameters and statistics were correct and adequate. Overall, the study clearly demonstrated the predictive accuracy for severity of AP according to revised Atlanta Classification.

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 13133

Title: Comparison of scoring systems in predicting the severity of acute pancreatitis

Reviewer code: 01799726

Science editor: Ya-Juan Ma

Date sent for review: 2014-08-08 09:33

Date reviewed: 2014-08-27 14:09

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input checked="" 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 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"/> Existing	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

1. In the material and methods section, it looks a little bit confusing. And the content will be clearer for authors if you split this section into more refined portions. 2. In the result section, it will be more reasonable to put the description of patient characteristics such as age, group, and etiology et al to the material and methods section. 3. The section of discussion needs further refining. 4. The abbreviation of medical terminology should not show the full name in each occurrence, especially in the table. You may list the abbreviation and full name later in the article. 5. The description of figure legend in page 8 need to be placed into the Result section, and summarize the contents as a subheading.

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 13133

Title: Comparison of scoring systems in predicting the severity of acute pancreatitis

Reviewer code: 01558248

Science editor: Ya-Juan Ma

Date sent for review: 2014-08-08 09:33

Date reviewed: 2014-09-23 15:02

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" 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	<input type="checkbox"/> Existing	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

1. Why the mild and moderated severity was in a group? 2. If possible, please discuss and tell us the highest score of each scoring system from the mortality patients or from the data of references. 3. try to simplify the results of each table instead of repeating.