

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 3812

Title: Achalasia: a review of clinical diagnosis, epidemiology, treatment and outcomes

Reviewer code: 00073418

Science editor: Wen, Ling-Ling

Date sent for review: 2013-05-25 19:36

Date reviewed: 2013-05-31 14:28

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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"/> [] 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

Achalasia: a review of clinical diagnosis, epidemiology, treatment and outcomes. O'Neill OM et al. The authors present a review of the present literature regarding these aspects of achalasia. The manuscript is well written, up to date and presents the reader with a comprehensive understanding of this rare condition. With the exception of a few typos, I have no remarks to the manuscript. Minor points (typos): P 4: "bird's beak" is used in the text, whereas "Bird Beak" is used in Figure 3, and "bird-beak" in the figure legend. p 8: "adrenocorticotrophic hormone resistant" (not "resistance") P 9: "multiple" (not "multiople")

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Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 3812

Title: Achalasia: a review of clinical diagnosis, epidemiology, treatment and outcomes

Reviewer code: 02445033

Science editor: Wen, Ling-Ling

Date sent for review: 2013-05-25 19:36

Date reviewed: 2013-06-04 20:07

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"/> 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)		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

This is a broad review on achalasia epidemiology, diagnosis and therapy. The manuscript is well written and the references updated. The epidemiology section is perhaps the most interesting and thoughtful. Perhaps I would have expected a more extensive comment on the new technological approaches to diagnosis, eg. high resolution manometry and high resolution esophageal pressure topography and their relationship with response to therapy. Some authors also suggest that esophagogastric junction distensibility may be associated with esophageal emptying better than LES pressure. Perhaps this may also deserve a comment. Finally, as authors state, esophageal cancer screening may not be cost-effective. In fact, the latest ASGE guidelines do not recommend surveillance (Gastrointest Endosc 2012).