

## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 29622

**Title:** Clinical Role of Non-Invasive Assessment of Portal Hypertension

**Reviewer's code:** 01560862

**Reviewer's country:** Japan

**Science editor:** Ze-Mao Gong

**Date sent for review:** 2016-08-24 16:51

**Date reviewed:** 2016-08-26 07:52

| 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 |  |
| <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 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

Color Doppler ultrasonography is a useful noninvasive modality for assessing gastrointestinal varices including rectal varices. In section of estimation of portal hypertension by Doppler ultrasound techniques, please add the below references. 1. Komatsuda et al (Abdom Imaging 1998; 23:45-50) reported the usefulness of color Doppler ultrasonography for the diagnosis of gastric and duodenal varices. 2. Sato et al (J Gastroenterol 2002; 37: 604-10) reported the usefulness of color Doppler ultrasonography for the hemodynamics of gastric varices. 3. Sato et al (Am J Gastroenterol 2007; 102: 2253-8) reported the usefulness of color Doppler ultrasonography for the diagnosis of rectal varices. 4. Sato et al (J Ultrasound Med 2009; 28: 1125-31) reported the usefulness of color Doppler ultrasonography for the hemodynamics of gastric varices and for evaluation of therapeutic effects of gastric variceal treatment.

## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 29622

**Title:** Clinical Role of Non-Invasive Assessment of Portal Hypertension

**Reviewer's code:** 00053950

**Reviewer's country:** Finland

**Science editor:** Ze-Mao Gong

**Date sent for review:** 2016-08-24 16:51

**Date reviewed:** 2016-08-28 21:52

| 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             | <input type="checkbox"/> The same title        | <input type="checkbox"/> High priority for         |
| <input checked="" type="checkbox"/> Grade C: Good | polishing  | <input type="checkbox"/> Duplicate publication | publication  |
| <input type="checkbox"/> Grade D: Fair            | <input checked="" type="checkbox"/> Grade C: A great deal of | <input type="checkbox"/> Plagiarism            | <input type="checkbox"/> Rejection                 |
| <input type="checkbox"/> Grade E: Poor            | language polishing   | <input checked="" type="checkbox"/> No         | <input checked="" type="checkbox"/> Minor revision |
|   | <input type="checkbox"/> Grade D: Rejected                   | 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

The authors aim to evaluate the role of non-invasive methods in assessment of portal hypertension. The level of portal hypertension correlates with complications of liver cirrhosis. However, the pressure can be accurately measured only with an invasive method. Remarks: - The authors disclose that the measurement of liver stiffness is a breakthrough in assessing the level of portal hypertension. This fact may be an overstatement as we know that transient elastography is sensitive in estimating stage 0 and stage 3-4 liver fibrosis. Thus, it is obvious that patients with moderate fibrosis and PH are more difficult to assess with TE, as well. - Several scores and indexes have been used as a marker of PH, but mostly they are too robust in use. In fact, in clinical practice parameters used in these scores are those which the clinician uses to estimate the level of liver disease and PH. Reduced trombocyte count, collaterals, varices, the size of the spleen, the volume and direction and the width of portal flow etc. are findings very useful in assessing PH in clinical practice. In addition, many parameters used in scores are affected by various interventions. - Nevertheless, simple non-invasive methods in screening purposes are needed. Quantitative MRI is too expensive for this and according to the Baveno VI criteria TE and platelet count may be used to discriminate patients without a need for



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screening varices but not assess the level of PH. - There are increasing number of studies using SWE for assessing liver and spleen stiffness especially in patients with B- and C-hepatitis. The results are encouraging. - There are no figures or tables and the language needs polishing.

## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 29622

**Title:** Clinical Role of Non-Invasive Assessment of Portal Hypertension

**Reviewer's code:** 00053451

**Reviewer's country:** Japan

**Science editor:** Ze-Mao Gong

**Date sent for review:** 2016-08-24 16:51

**Date reviewed:** 2016-09-06 14:44

| 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 checked="" 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 type="checkbox"/> Grade D: Fair            | <input type="checkbox"/> Grade C: A great deal of language polishing  | <input type="checkbox"/> Plagiarism            | <input checked="" type="checkbox"/> Rejection          |
| <input checked="" type="checkbox"/> Grade E: Poor | <input type="checkbox"/> Grade D: Rejected                            | <input checked="" type="checkbox"/> No         | <input 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

Summary and general comments This is a review article about the study of non-invasive assessment of portal hypertension. The authors overviewed literatures, outlined the current clinical significance and discussed future perspective. Most of the knowledge is well known, and further improvement may be needed. Major comments Unfortunately, the number of the reference paper is not enough. Please make clear the way for literature search and conduct comprehensive review. Page 6 -7 The paragraph regarding Doppler US could be shortened because of the limited utility as the authors already recognized. Instead, please add sentences about contrast US since there are many accumulated data. Please refer following paper, and you will find recent trends. Non-invasive assessment of portal hypertension and liver fibrosis using contrast-enhanced ultrasonography. Maruyama H, Shiha G, Yokosuka O, Kumar A, Sharma BC, Ibrahim A, Saraswat V, Lesmana CR, Omata M. Hepatol Int. 2016 Mar;10(2):267-76. Please add tables and figures to summarize the data for better understanding the knowledge.

## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 29622

**Title:** Clinical Role of Non-Invasive Assessment of Portal Hypertension

**Reviewer's code:** 00034635

**Reviewer's country:** Spain

**Science editor:** Ze-Mao Gong

**Date sent for review:** 2016-08-24 16:51

**Date reviewed:** 2016-09-03 23:47

| 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 checked="" 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"/> 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 checked="" type="checkbox"/> Plagiarism | <input checked="" type="checkbox"/> Minor revision     |
| <input type="checkbox"/> Grade E: Poor            |   | [ Y ] No                                       | <input type="checkbox"/> Major revision                |
|   |   | BPG Search:                                    |  |
|   |   | <input type="checkbox"/> The same title        |  |
|   |   | <input type="checkbox"/> Duplicate publication |  |
|   |   | <input type="checkbox"/> Plagiarism            |  |
|   |   | [ Y ] No                                       |  |

## COMMENTS TO AUTHORS

The authors comprehensively reviewed different non-invasive methods for evaluating portal hypertension, including biochemical, Doppler US and transient elastography-based and in particular shear wave elastography. There some other methods such as sub-harmonic aided pressure (Eisenbrey et al Radiology 2013) that should be commented and discussed. In addition, I would suggest to incorporate an algorithm for screening and evaluation of CSPHT and selecting out what patients should be further evaluated with endoscopy and/or invasive HVGP.

## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 29622

**Title:** Clinical Role of Non-Invasive Assessment of Portal Hypertension

**Reviewer's code:** 00068215

**Reviewer's country:** Romania

**Science editor:** Ze-Mao Gong

**Date sent for review:** 2016-08-24 16:51

**Date reviewed:** 2016-09-05 14:25

| 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 checked="" 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"/> 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"/> Plagiarism            | <input type="checkbox"/> Minor revision                |
| <input type="checkbox"/> Grade E: Poor            |   | <input checked="" type="checkbox"/> No         | <input checked="" type="checkbox"/> Major revision     |
|   |   | BPG Search:                                    |  |
|   |   | <input type="checkbox"/> The same title        |  |
|   |   | <input type="checkbox"/> Duplicate publication |  |
|   |   | <input type="checkbox"/> Plagiarism            |  |
|   |   | <input checked="" type="checkbox"/> No         |  |

## COMMENTS TO AUTHORS

Assessment of portal pressure by the hepatic venous pressure gradient (HVPG) has been a useful predictor of outcomes in both stages of cirrhosis. Diagnostic endoscopy findings related to portal hypertension are esophageal varices (EV), gastric varices and portal hypertensive gastropathy PHG. Rarely, ectopic duodenal varices can be found. The risk of bleeding from EV is tightly related to their size and presence of so-called 'high-risk signs'. HVPG and endoscopy are current gold-standard techniques to assess portal hypertension. However, its use is limited by their invasiveness. Patients would benefit from noninvasive tests that are able to provide similar information. The non-invasive methods are also necessary for assessment of the hemodynamic response to pharmacological therapy for portal hypertension. The combination of different methods provides theoretical advantages over the use of a single method and complementary information may lead to more robust predictions. Please, add the combined indices/algorithms based on these non-invasive methods with their sensitivity and specificity to permit a fair clinical judgment.

## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 29622

**Title:** Clinical Role of Non-Invasive Assessment of Portal Hypertension

**Reviewer's code:** 00159367

**Reviewer's country:** Romania

**Science editor:** Ze-Mao Gong

**Date sent for review:** 2016-08-24 16:51

**Date reviewed:** 2016-09-05 14:27

| 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 checked="" 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"/> 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 checked="" type="checkbox"/> Plagiarism | <input checked="" type="checkbox"/> Minor revision     |
| <input type="checkbox"/> Grade E: Poor            |   | [ Y ] No                                       | <input type="checkbox"/> Major revision                |
|   |   | BPG Search:                                    |  |
|   |   | <input type="checkbox"/> The same title        |  |
|   |   | <input type="checkbox"/> Duplicate publication |  |
|   |   | <input type="checkbox"/> Plagiarism            |  |
|   |   | <input checked="" type="checkbox"/> No         |  |

## COMMENTS TO AUTHORS

The review is comprehensive and the topic is very important. Evaluation of portal hypertension by means of noninvasive, reproductive methods underlined. Maybe in the conclusions of the review more clearcut indications for practical use of the noninvasive methods in the estimation of the severity of portal hypertension to be described.

## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 29622

**Title:** Clinical Role of Non-Invasive Assessment of Portal Hypertension

**Reviewer's code:** 00013649

**Reviewer's country:** Italy

**Science editor:** Ze-Mao Gong

**Date sent for review:** 2016-08-24 16:51

**Date reviewed:** 2016-09-05 17:08

| CLASSIFICATION   | LANGUAGE EVALUATION  | SCIENTIFIC MISCONDUCT                          | CONCLUSION   |
|--|--|--|--|
| <input checked="" type="checkbox"/> Grade A: Excellent | <input checked="" type="checkbox"/> Grade A: Priority publishing     | Google Search:                                 | <input checked="" 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"/> 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 checked="" type="checkbox"/> Plagiarism | <input type="checkbox"/> Minor revision                |
| <input type="checkbox"/> Grade E: Poor                 |  | [ Y ] No                                       | <input type="checkbox"/> Major revision                |
|  |  | BPG Search:                                    |  |
|  |  | <input type="checkbox"/> The same title        |  |
|  |  | <input type="checkbox"/> Duplicate publication |  |
|  |  | <input type="checkbox"/> Plagiarism            |  |
|  |  | [ Y ] No                                       |  |

## COMMENTS TO AUTHORS

Very nice work. It offers a concise and good balanced overview of the most important aspects related with the topic.