



PEER-REVIEW REPORT

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Reviewer’s code: 05548747

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Doctor

Reviewer’s Country/Territory: Japan

Author’s Country/Territory: Costa Rica

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Reviewer chosen by: AI Technique

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Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
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Peer-reviewer statements	Peer-Review: [<input checked="" type="checkbox"/>] Anonymous [<input type="checkbox"/>] Onymous Conflicts-of-Interest: [<input type="checkbox"/>] Yes [<input checked="" type="checkbox"/>] No
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SPECIFIC COMMENTS TO AUTHORS

Comment to the Authors This is a review article of role of current role of EUS in pancreatic cancer. Several reports about EUS-procedures are being considered. This is a very interesting subject for an endosonographer, and I have a number of queries for the authors. 1) Regarding EUS-guided tissue, the needle tract seeding is seen in late complications, please also discuss the safety and risks of EUS-FNA/FNB. 2) The RCT of EUS-CPN is also reported by Kanno Y, et al (Gastrointest Endosc, 2020. 92(1):120-130). Please quote it. 3)EUS-CDS using LAMS is a regionally limited condition. Also, please discuss the time to recurrent biliary obstruction of EUS-BD. 4) Please discuss future prospects for cancer treatment such as EUS-guided RFA and EUS-FNI in conclusion.