



## PEER-REVIEW REPORT

**Name of journal:** World Journal of Clinical Cases

**Manuscript NO:** 55528

**Title:** Case Report of Balloon-Assisted Endoscopic Submucosal Dissection for Treating Small Intestinal Lipomas

**Reviewer's code:** 03474116

**Position:** Editorial Board

**Academic degree:** AGAF, MD, PhD

**Professional title:** Professor

**Reviewer's Country/Territory:** Japan

**Author's Country/Territory:** China

**Manuscript submission date:** 2020-08-01

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2020-08-01 22:48

**Reviewer performed review:** 2020-08-02 23:48

**Review time:** 1 Day

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input checked="" type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer statements</b>	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**

General: This report is case report to explore the clinical feasibility of ESD with balloon assisted endoscopy for the treatment of small intestinal lipoma. Authors concluded balloon assisted endoscopic ESD for the treatment of deep intestinal lipoma is safe and reliable, with good clinical feasibility. This study was well written. Major comments: 1.

This is case report, not study. Please revise title. 2. Please describe general inclusion criteria to do ESD with balloon assisted endoscopy for the treatment of small intestinal tumor. How about kinds of tumor, maximum of size, numbers and background of patients? 3. Please show limit to perform ESD with balloon assisted endoscopy for the treatment of small intestinal lipoma. 4. Please make a table to show background of patients, procedure time, and complication in this study. 5. After 3-6 months of postoperative follow-up, the clinical symptoms caused by lipoma were significantly relieved or disappeared after treatment. There is no information of the clinical symptoms before ESD. In addition, if patients have no clinical symptoms, how did authors treat deep intestinal lipoma? 6. Stenosis of the small intestine is feared after ESD. How about it? 7. As authors suggested, endoscopic treatment in the deep small intestine is seem to be difficult because small intestine characterized with thin intestinal wall, abundant blood supply, twists and turns, and narrow space. What are the criteria for choosing surgical treatment?



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**Reviewer's code:** 05194798

**Position:** Editorial Board

**Academic degree:** MD

**Professional title:** Director

**Reviewer's Country/Territory:** Japan

**Author's Country/Territory:** China

**Manuscript submission date:** 2020-08-01

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2020-08-01 21:38

**Reviewer performed review:** 2020-08-07 10:01

**Review time:** 5 Days and 12 Hours

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<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
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer statements</b>	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**

This manuscript evaluated the clinical feasibility of endoscopic submucosal dissection (ESD) with balloon assisted endoscopy for the treatment of small intestinal lipoma. The authors performed ESD for intestinal lipoma in 4 cases, and a favorable outcome without any complications was achieved in all cases. As this article presented a promising, low-invasive, alternative treatment for the resection of intestinal lipoma, the results will be of interest to clinicians in the field. However, the following major and minor issues require clarification: Major 1. It seems to be difficult to understand this manuscript was a case report or an original article. Please reconsider the title and structure. Minor 1. (P2L15-19) The authors should delete the sentences. Instead, they should describe the first sentence in the Inclusion criteria and the second sentence in the Result section. 2. The description in Case Reports should be included in the Result section. 3. (Figure 1) the endoscopic images should be edited as letters were not shown. 4. Please explain why the intervals between the each ESD treatment in patient 1 were about one year. 5. The symptom of abdominal distention and pain finally disappeared. The authors should show the change of abdominal symptoms after first and second ESD in Patient 1 as well.

6. Please describe how the authors diagnosed intestinal tumors as lipoma preoperatively. Were biopsies or EUS performed as well as CT scan or MRI?



## RE-REVIEW REPORT OF REVISED MANUSCRIPT

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**Reviewer's code:** 05194798

**Position:** Editorial Board

**Academic degree:** MD

**Professional title:** Director

**Reviewer's Country/Territory:** Japan

**Author's Country/Territory:** China

**Manuscript submission date:** 2020-08-01

**Reviewer chosen by:** Jia-Ping Yan

**Reviewer accepted review:** 2020-08-25 09:31

**Reviewer performed review:** 2020-08-25 10:14

**Review time:** 1 Hour

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<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
<b>Conclusion</b>	<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
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

### SPECIFIC COMMENTS TO AUTHORS



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The manuscript is much improved. Modification is required in Figure 2 as below: 1. The endoscopic images should be edited as letters were not shown. 2. The numberings in endoscopic images does not much those in figure legend.