

## PEER-REVIEW REPORT

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

**Manuscript NO:** 69282

**Title:** Superior mesenteric venous thrombosis: Endovascular management and outcomes

**Provenance and peer review:** Unsolicited manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 05843826

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

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

**Author's Country/Territory:** United States

**Manuscript submission date:** 2021-07-16

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-07-19 06:59

**Reviewer performed review:** 2021-07-19 09:51

**Review time:** 2 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 Grade E: Do not publish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</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous

statements

Conflicts-of-Interest: [ ] Yes [Y] No

## SPECIFIC COMMENTS TO AUTHORS

This was a retrospective review of 24 patients who were diagnosed with superior mesenteric venous thrombosis (SMVT) and received endovascular therapies. The author assessed the technical and clinical outcomes as well as follow-up period afterward. SMVT is a relatively rare condition; mortality remains high due to nonspecific symptoms, delayed diagnosis, and insufficient clinician awareness. This study reported a cohort including the most cases of SMVT so far. But there are several study weaknesses.

Materials and Methods Page 1 – The authors mentioned that patients were excluded if they didn't have sufficient follow-up data. Please indicate the specific follow-up period.

Page 2 – Endovascular therapy was initiated after failure of systemic anticoagulation. Please explain the standards of failure of anticoagulation.

Page 2 – Please quantitatively or semi-quantitatively explain the short-term technical success. Vascular recanalization during the IR procedure? Or contrast filling on CTA images after the procedure?

Results Page 3 – What are the differences between “presentation” and “symptom onset”? This sentence is confusing: “The median time between presentation and intervention was 3 days (0-15 days) from symptom onset and intervention was 8 days (2-35 days).”

Page 4 – How many patients survived over 5 years or 10 years? Since the median follow-up was 23 months, how were the 5- and 10- survival rates calculated?

Discussion Page 6 – The authors mentioned reperfusion injury in discussion part, then did the reperfusion injury occurred in presented cohort? Table 2 The proportion endovascular modality is confusing. How many patients received combined endovascular treatment? Please clear it. Figures Please consider adding typical interventional radiologic images that reflects the endovascular treatments referred in this manuscript.

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**Peer-review model:** Single blind

**Reviewer's code:** 03826433

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

**Reviewer's Country/Territory:** South Korea

**Author's Country/Territory:** United States

**Manuscript submission date:** 2021-07-16

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-07-18 22:20

**Reviewer performed review:** 2021-07-20 00:13

**Review time:** 1 Day and 1 Hour

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



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statements

Conflicts-of-Interest: [ ] Yes [Y] No

#### **SPECIFIC COMMENTS TO AUTHORS**

Even considering that SMVT is a rare disease, 24 cases in 20 years are too few. The research value of this paper is not high because the treatment policy has developed rapidly over the past 20 years, and the current trend is to implement PV stent together. Also, the references are too old to reflect the latest trends.

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**Peer-review model:** Single blind

**Reviewer's code:** 03714290

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

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

**Author's Country/Territory:** United States

**Manuscript submission date:** 2021-07-16

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-07-18 19:43

**Reviewer performed review:** 2021-07-24 13:20

**Review time:** 5 Days and 17 Hours

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input 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</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous

statements

Conflicts-of-Interest: [ ] Yes [Y] No

## SPECIFIC COMMENTS TO AUTHORS

The authors perform an interesting and original study concerning efficacy of endovascular therapy in the management of superior mesenteric vein thrombosis. The study is well-designed and provides some original data regarding primary and secondary patency. However some points could be reviewed: - When the authors describe laboratory abnormalities, instead of presenting median lactate level or leukocyte count, they could describe how many patients had leukocytosis or hyperlactatemia and perhaps analyze if there could be a significant statistical association between these laboratory abnormalities and the study end points, as there is actually evidence that lactic acidosis and leukocytosis can be associated with higher likelihood of requiring bowel resection (Andraska E et al, J Vasc Surg Venous Lymphat Disord. 2020 Sep;8(5):748-755) - There is no comparison between different endovascular approaches (e. g. between thrombectomy and thrombolysis). There were no statistically significant difference regarding study end points? At least a trend? If the reason is the small sample size, which is a limitation of the study, this should be stated. - There is a study involving 43 patients with acute superior mesenteric vein thrombosis demonstrating that thrombolysis integrated in a multidisciplinary step-based approach may result in favorable outcomes and lower rates of surgical intervention in these patients (Yang S, et al. Thromb Res. 2015 Jan;135(1):36-45). Perhaps it could be interesting to compare these results with your study in the Discussion. - It would be interesting to describe how the results of the study may influence clinical practice as this is not clearly stated in the manuscript. Please understand these suggestions as constructive criticisms. The authors still deserve being congratulated for a relevant and well-designed study concerning this unexplored topic.



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## RE-REVIEW REPORT OF REVISED MANUSCRIPT

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**Peer-review model:** Single blind

**Reviewer's code:** 03826433

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

**Reviewer's Country/Territory:** South Korea

**Author's Country/Territory:** United States

**Manuscript submission date:** 2021-07-16

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

**Reviewer accepted review:** 2021-09-07 22:03

**Reviewer performed review:** 2021-09-07 22:10

**Review time:** 1 Hour

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<input checked="" type="checkbox"/> Grade A: Priority publishing <input 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 checked="" type="checkbox"/> Accept (General priority) <input 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**

I agree to publish this study as is.