

7041 Koll Center Parkway, Suite 160, Pleasanton, CA 94566, USA **Telephone:** +1-925-399-1568 **E-mail:** bpgoffice@wjgnet.com https://www.wjgnet.com

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 69266

Title: Successful management of life-threatening aortoesophageal fistula: A case report

and review of the literature

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05919593

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Iran

Author's Country/Territory: China

Manuscript submission date: 2021-06-23

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-06-23 12:42

Reviewer performed review: 2021-06-26 05:05

Review time: 2 Days and 16 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	 [] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	 [] Accept (High priority) [] Accept (General priority) [] Minor revision [Y] Major revision [] Rejection
Re-review	[]Yes [Y]No



Baishideng **Publishing**

7041 Koll Center Parkway, Suite 160, Pleasanton, CA 94566, USA **Telephone:** +1-925-399-1568 E-mail: bpgoffice@wjgnet.com https://www.wjgnet.com

Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous
statements	Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

This is an interesting manuscript discussing a case of aortoesophageal fistula. However, some issues need further consideration. 1. According to your search, there are plenty of previous case reports (around 19) with similar topic. what is the novel points in your case that encouraged you to write this manuscript? please explain the aims of your study in the introduction more clearly and explain the novel points of your study in the discussion. 2. It might be better to further describe the type of chest pain (sharp/ dull, remitting/ relapsing/ progressive, radiation of pain, localization e.g. retrosternal, the factors exacerbating or relieving the pain severity, associated conditions, e.g. dysphagia, odynophagia, weight loss). what was the stage of his cancer? did he received any chemotherapy? if he had a history of dysphagia, did he undergo any surgical procedure for relieving dysphagia? as these procedures may increase a risk of AO fistula? did he show any prodromal finding? previous history of melena/ hematemesis? After the final surgery, did you bypass the esophagus with gastrostomy tube or not? (for better healing of the esophageal ulcer/ fistla) and why?. was it unnecessary to evaluate the esophagus after the procedure with an endoscopy (to evaluate the ulcer and search for any other associated sources of bleeding)? please discuss the reasons of your clinical decisions in the discussion. why do you think an aortoesophageal fistula appeared in this patient? please discuss this in the discussion. 3. It may be appropriate to add the nationality/ race of the reported cases in your table as i think most of them have an Asian origin? I think it would be interesting to discuss this in more detail in the discussion. 4. In what areas you think the literature lack information and further research is worthy? please discuss this at the end of your discussion. 5. Some language corrections are necessary. Difinite



7041 Koll Center Parkway, Suite 160, Pleasanton, CA 94566, USA **Telephone:** +1-925-399-1568 **E-mail:** bpgoffice@wjgnet.com https://www.wjgnet.com

articles (the) should be added before the used abbreviations (e.g. the TEVAR... instead of TEVAR...). Better to delete the sentence (Management of aortoesophageal fistula) at the end of your title. edit the title of table 1 to reported cases of aortoesophageal fistula treated with the TEVAR procedure in those with esophageal cancer.