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PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 78181

Title: Gastric ulcer treated using an elastic traction ring combined with clip: A case

report and literature review

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05260389 Position: Peer Reviewer Academic degree: MD

Professional title: Doctor, Surgeon

Reviewer's Country/Territory: Brazil

Author's Country/Territory: China

Manuscript submission date: 2022-06-21

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-06-21 18:50

Reviewer performed review: 2022-06-30 01:53

Review time: 8 Days and 7 Hours

Scientific quality	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish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) [Y] Accept (General priority) [] Minor revision [] Major revision [] Rejection
Re-review	[Y]Yes []No



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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

statements Conflicts-of-I

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

SPECIFIC COMMENTS TO AUTHORS

Dear authors, I read your article with special interest. The approach was interesting and I consider that it collaborates with current literature. I have some observations and I suggest proofreading the English. In the Case material and Method introduction section "A tissue clip with a elastic traction ring was inserted into the stomach cavity through the biopsy aperture and fixed to the normal mucosa surrounding the ulcer". What did you mean with "inserted into the stomach cavity through the biopsy aperture"? I understand that the sentence should be rewritten, since the entire procedure was done endoscopically and no the ring did not enter the gastric cavity through the biopsy site. Does the phrase mean that the elastic traction ring was fixed at the biopsy site and inserted into de stomach through the endoscope instrument port? In the second sentence of the discussion, include stage IIB of the Forrest classification.



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Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 04213496 Position: Peer Reviewer Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Japan

Author's Country/Territory: China

Manuscript submission date: 2022-06-21

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-07-05 12:49

Reviewer performed review: 2022-07-08 21:17

Review time: 3 Days and 8 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**

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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

statements

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

SPECIFIC COMMENTS TO AUTHORS

The authors reported a new designed device regarding hemostasis for peptic ulcer. Indeed, the device can suture relatively large ulcers . However, I have some questions or request to improve the quality of the report. 1. Is there an upper limit in diameter of ulcer? If an ulcer is too large, is it possible to suture the ulcer? 2. It is more important to coagulate (by electrical devices) or grasp (by clip) an exposing vessel in an ulcer than to suture the ulcer for accomplishing hemostasis. In this meaning, is the device the reviewer designed effective even for Forrest 1a or 1b ulcer? 3. Regarding the final sentence of Discussion, the message is strong, because the article is a case report without any statistical analysis. 4. Please correct appearance especially usage of space.