

## PEER-REVIEW REPORT

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

**Manuscript NO:** 84817

**Title:** Age, blood tests and comorbidities and AIMS65 risk scores outperform Glasgow-Blatchford and pre-endoscopic Rockall score in patients with upper gastrointestinal bleeding

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

**Peer-review model:** Single blind

**Reviewer's code:** 02445721

**Position:** Peer Reviewer

**Academic degree:** PhD, MD

**Professional title:** Associate Professor

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

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

**Manuscript submission date:** 2023-03-28

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2023-04-04 04:47

**Reviewer performed review:** 2023-04-10 00:45

**Review time:** 5 Days and 19 Hours

Scientific quality	<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 Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input checked="" type="checkbox"/> Grade D: No novelty

<b>Creativity or innovation of this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation
<b>Scientific significance of the conclusion in this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
<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

## SPECIFIC COMMENTS TO AUTHORS

as attached file

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**Peer-review model:** Single blind

**Reviewer's code:** 01467363

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Full Professor

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

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

**Manuscript submission date:** 2023-03-28

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2023-04-08 17:12

**Reviewer performed review:** 2023-04-16 11:31

**Review time:** 7 Days and 18 Hours

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
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input checked="" type="checkbox"/> Grade D: No novelty

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<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" 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

## SPECIFIC COMMENTS TO AUTHORS

Title: appropriate to define the content of the article. Key words: 6, appropriate.

Abstract: 270 words, structured, informative. Core tip: 74 words, appropriate.

Introduction: 436 words, the reader is acquainted with known facts about upper GI bleeding, risk assesment of patients and different scoring systems. Material and methods: 611 words, the authors adequately explain the methodology of the study and statistical analysis. Results: 625 words, the authors present a wealth of data obtained through advanced statistical analysis. The results are also presented in 6 tables.

Discussion: 1564 words, the authors spend many words on the interpretation of the obtained statistical data, compare with the results of studies in the past and do not forget to add a proposal to enrich some scoring systems with additional parameters. I really miss the consideration of the authors about the fact that different scoring systems cannot replace the clinical evaluation of patients and the prediction of complications that are



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common in bleeding patients. Conclusion: 73 words, the authors conclude that for each of the questions they raised (in-hospital mortality, type of intervention and length of admission) would use another, suitable scoring system - I cannot agree with this conclusion. References: 38, contemporary and influential journals from this field. Conflict of interest: no conflict declared. Financial support: the authors deny financial support. Institutional review board statement: the study was approved by the Hospital's Ethics Committee, approval number 39/30.03.2022. Informed consent statement: patients were not required to give informed consent to the study because the analysis used anonymous clinical data that were obtained after each patient agreed to treatment by written consent. Opinion of the reviewer: The article deals with an interesting topic in the interdisciplinary field of gastroenterology/emergency medicine medicine/surgery. Unfortunately, the contribution does not bring any novelty in this field.

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**Reviewer's code:** 03713791

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Associate Professor

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

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

**Manuscript submission date:** 2023-03-28

**Reviewer chosen by:** Geng-Long Liu

**Reviewer accepted review:** 2023-04-23 15:06

**Reviewer performed review:** 2023-04-25 16:13

**Review time:** 2 Days and 1 Hour

Scientific quality	<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
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty

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<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

## SPECIFIC COMMENTS TO AUTHORS

In the present retrospective study Morarasu et al compared Glasgow Blatchford score (GBS) to pre-endoscopic Rockall (PERS), ABC and AIM65 as prognostic factors in gastrointestinal bleeding to predict mortality, hospital stay and need of surgical interventions. Main comments: 1) The main problem of the design of this study is that such scores have been developed for non variceal bleeding. Variceal bleeding often underlies a cirrhosis, which was indeed less common in the non variceal group, therefore there is relevant heterogeneity between variceal and non variceal group. Therefore I suggest to remove all the analysis of the variceal bleeding, which could be used for another publication and compared to other specific scores, such as MELD or Child Pugh. 2) No patient required angiography rather than surgery? 3) Were for endoscopic interventions OVESCO clips or haemostatic powders used? 4) Considering the good performance of lactate, Authors could add ROC curve and cutoff estimation for

the outcomes they investigated.



## RE-REVIEW REPORT OF REVISED MANUSCRIPT

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**Peer-review model:** Single blind

**Reviewer's code:** 03713791

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Associate Professor

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

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

**Manuscript submission date:** 2023-03-28

**Reviewer chosen by:** Yu-Lu Chen

**Reviewer accepted review:** 2023-05-15 09:18

**Reviewer performed review:** 2023-05-15 10:24

**Review time:** 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 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



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<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>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**

Answer to point 1 was not satisfactory. Authors could at least perform analyses separately for variceal and non-variceal bleeding. Point 4: a sensitivity of 64.3% and a specificity of 53.2% are very bad, therefore Authors are not allowed to conclude that lactate is a good predictor.