

## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 16875

**Title:** Improved bowel preparation increases polyp detection and unmasks significant polyp miss rate

**Reviewer's code:** 00739893

**Reviewer's country:** Portugal

**Science editor:** Xiu-Xia Song

**Date sent for review:** 2015-02-02 08:30

**Date reviewed:** 2015-03-05 21:00

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input checked="" type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input checked="" type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

## COMMENTS TO AUTHORS

excellent article

## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 16875

**Title:** Improved bowel preparation increases polyp detection and unmasks significant polyp miss rate

**Reviewer's code:** 02667551

**Reviewer's country:** Germany

**Science editor:** Xiu-Xia Song

**Date sent for review:** 2015-02-02 08:30

**Date reviewed:** 2015-06-19 14:23

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input checked="" type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

## COMMENTS TO AUTHORS

The manuscript "Improved bowel preparation increases polyp detection and unmasks significant polyp miss rate" is clear and well-written. The manuscript reports on the comparison of two methodologies, full dose versus split dose, in colonoscopy and concludes with the report, that split-dose regimen enhanced polyp detection and reduced polyp miss rate. Major: The objective of this study was to compare full dose with split dose. Thereby, the researchers have undergone a tacit assumption in conducting their retrospective, clinical study, that the split dose is superior to full dose, even before the study results were available. It is out this tacit assumption that the researchers calculated the miss rate; the split dose served as the reference. Ideally to compare two methodologies against each other, a third gold-standard would be required as a common reference for both. This requires clear explaining in Methods, as well as stating in Discussion as a limitation. The subject per se demands also to be discussed, i.e., a cursory sentence towards this end as a limitation in Discussion would fall short of discussing it. Discussion would require introducing these points and rephrasing Discussion, and toning down the Conclusion. Did the two reported endoscopists, who



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did all the examinations, conduct the examination once for both full dose and split dose or was it that one endoscopist conducted uniquely only full dose, and the other split dose? This should be clear in text. A limitation of interobserver variability has been mentioned, but it remains unclear how this difference came about. Conclusion would require further toning down. Minor: ? Colonoscopic procedures, 1 paragraph: Please delete the names of the endoscopists. Rephrasing the first sentence with something equable to "Two equally experienced endoscopists with experience of more than 5000 colonoscopies did all the examinations" suffice to convey the methodological aspects of the study. ? Colonoscopic procedures, 1 paragraph, 3 sentence: Replace "he" with "the endoscopist". ? 3. Colonoscopic procedures, last paragraph: The standard abbreviations are a.m. and p.m. ? Statistical analysis: Remove the colon ( : ) in the first sentence. Replace big caps for "Beta" with small "beta". ? Results: provide the 95% confidence intervals (C. I.) and p-values for all reported parameters.