



**Baishideng
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PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 54456

Title: Transjugular intrahepatic portosystemic shunt and splenectomy are more effective than endoscopic therapy for recurrent variceal bleeding in patients with idiopathic noncirrhotic portal hypertension

Reviewer's code: 04373886

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Professor, Research Scientist

Reviewer's Country/Territory: Switzerland

Author's Country/Territory: China

Manuscript submission date: 2020-02-04

Reviewer chosen by: AI Technique

Reviewer accepted review: 2020-02-10 03:25

Reviewer performed review: 2020-02-27 12:02

Review time: 17 Days and 8 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
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<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input checked="" type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not publish	language polishing	<input checked="" type="checkbox"/> Minor revision	topic of the manuscript:
	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

This study is very interesting. The etiology of this disorder is still unknown and differs greatly in western and eastern countries. Idiopathic non - cirrhotic portal hypertension may be caused by intestinal infection or HIV infection, drugs or toxins, genetic as well as immunological or hematological disorders. Although hepatic venous pressure gradient in patients with idiopathic non - cirrhotic portal hypertension is normal or slightly increased, variceal bleeding in these patients can be fatal and needs appropriate treatment. Endoscopic therapy, including endoscopic variceal ligation, endoscopic injection sclerotherapy, with the addition of non-selective β -blockers, remains the prevalent method for treatment and secondary prevention of recurrent gastroesophageal variceal bleeding in patients with idiopathic non - cirrhotic portal hypertension. Surgery including splenectomy and esophagogastric devascularization is still widely performed, and has fewer postoperative complications, such as portal vein thrombosis, in patients with idiopathic non - cirrhotic portal hypertension compared with patients with cirrhosis. However, these different procedures have not been fully compared, although they have been compared in portal hypertension due to cirrhosis. This study is well designed, the results are informative. Comments: 1. The title is too long. Please revise it. 2. Methods are clear. 3. Results are good. Please check and edit the tables. The structure



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of the tables are not clear. 3. Discussion and references list are acceptable. 4. Manuscript requires a minor language editing.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

- The same title
- Duplicate publication
- Plagiarism
- No

BPG Search:

- The same title
- Duplicate publication
- Plagiarism
- No



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PEER-REVIEW REPORT

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Manuscript NO: 54456

Title: Transjugular intrahepatic portosystemic shunt and splenectomy are more effective than endoscopic therapy for recurrent variceal bleeding in patients with idiopathic noncirrhotic portal hypertension

Reviewer's code: 04736842

Position: Peer Reviewer

Academic degree: FIAC, FRCPC, MD, PhD

Professional title: Associate Professor, Research Associate, Research Scientist

Reviewer's Country/Territory: Portugal

Author's Country/Territory: China

Manuscript submission date: 2020-02-04

Reviewer chosen by: AI Technique

Reviewer accepted review: 2020-02-13 01:10

Reviewer performed review: 2020-02-27 12:09

Review time: 14 Days and 10 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
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<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	(High priority)	<input type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good		<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not publish	<input type="checkbox"/> Grade D: Rejection	<input checked="" type="checkbox"/> Minor revision	topic of the manuscript:
		<input type="checkbox"/> Major revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

This is an interesting study about the transjugular intrahepatic portosystemic shunt and splenectomy plus esophagogastric devascularization for recurrent variceal bleeding in idiopathic noncirrhotic portal hypertension patients. The manuscript is well written. Only the title is too long, and some minor language polishing should be corrected.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

- The same title
- Duplicate publication
- Plagiarism
- No

BPG Search:

- The same title
- Duplicate publication
- Plagiarism
- No