

## PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 66301

**Title:** Endoscopic ultrasound fine needle aspiration vs fine needle biopsy in solid lesions:

A multi-center analysis

Reviewer's code: 01467363 Position: Editorial Board Academic degree: MD, PhD

**Professional title:** Full Professor

Reviewer's Country/Territory: Slovenia

Author's Country/Territory: Brazil

Manuscript submission date: 2021-03-25

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-06-26 16:20

Reviewer performed review: 2021-07-04 10:21

**Review time:** 7 Days and 18 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| Scientific quality | [ ] Grade A: Excellent [Y] Grade B: Very good [ ] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish                                  |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          | [ ]Yes [Y]No   |
| Peer-reviewer      | Peer-Review: [Y] Anonymous [ ] Onymous   |
| statements         | Conflicts-of-Interest: [ ] Yes [ Y] No   |



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## SPECIFIC COMMENTS TO AUTHORS

Title and running title: accurately reflects the topic and contents of the paper. Abstract: is appropriate, structured, 276 words. Key words: 6 key words, precisely define the content of the paper. Core tip: 68 words, appropriate. Introduction: 458 words, the reader is acquainted with known facts about EUS guided procedures (FNA) obtaining tissue samples and their limitations. Newer FNB needles may improve diagnostic yield and may potentially obviate the need for ROSE (rapid-on-site evaluation). The purpose of the study was to compare these two methods in a large multi-center study. Methodology: 963 words, the description of the methodology is carefully written, the section is divided into subsections. The advanced statistic metods used are appropriate. Results: 626 words, the description of the results is updated with 4 tables (baseline information of the patients, summary of diagnostic results, comparison between methods with and without ROSE, statistical snalyses between methods with and without ROSE). Discussion: 1315 words, the discussion presents studies published in the past, which touch this topic of interventional endoscopy. The authors highlight the fact that this manuscript(study is the first to compare FNA and FNB with and without ROSE in solid lesions. They also recognize some limitations of the study: a retrospective nature of the study with limitations expected with such a design, including potential selection bias, lack of randomization, loss-to-follow-up, and potential for cofounders. In the last paragraph, they conclude, that EUS-FNB is superior to EUS-FNA in the diagnosis of solid lesions and allows more cell-block evaluation, with similar number of passes required to achieve an adequate sample. References: 31 references, from Gastrointest Endosc 2002 - Endosc Int Open 2020. Funding: none. Ethics of the study: the study was approved by the Research Ethics Committee from Partners Human Research (Protocol no. 2003P001665). Written



informed consent was obtained from all patients. Conflict of intersts: two authors, MR and CCT report conflict of interests. Opinion of the reviewer Interesting manuscript, with plenty of data, suitable for publication.



## PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 66301

**Title:** Endoscopic ultrasound fine needle aspiration vs fine needle biopsy in solid lesions:

A multi-center analysis

Reviewer's code: 05260813 Position: Peer Reviewer Academic degree: MD

**Professional title:** Associate Professor, Instructor, Surgeon

Reviewer's Country/Territory: Colombia

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

Manuscript submission date: 2021-03-25

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-06-26 12:42

Reviewer performed review: 2021-07-05 12:54

**Review time:** 9 Days

| Scientific quality       | [ ] Grade A: Excellent [Y] Grade B: Very good [ ] Grade C: Good<br>[ ] Grade D: Fair [ ] Grade E: Do not publish                           |
|--------------------------|--|
| Language quality         | [Y] Grade A: Priority publishing [] 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                | [ ]Yes [Y]No   |
| Peer-reviewer statements | Peer-Review: [Y] Anonymous [ ] Onymous  Conflicts-of-Interest: [ ] Yes [Y] No  |



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## SPECIFIC COMMENTS TO AUTHORS

1 Title. Does the title reflect the main subject/hypothesis of the manuscript? Yes Abstract. Does the abstract summarize and reflect the work described in the manuscript? Yes, the abstract effectively describes the article. 3 Key words. Do the key words reflect the focus of the manuscript? The terminology used in the appropriate. 4 Background. Does the manuscript adequately describe the background, present status and significance of the study? The description of the study and the importance have a wording according to the objective of the study. 5 Methods. Does the manuscript describe methods (e.g., experiments, data analysis, surveys, and clinical trials, etc.) in adequate detail? Yes, the description is organized and governed by the requirements of the magazine. Describe in an organized way how the study was carried out. 6 Results. Are the research objectives achieved by the experiments used in this study? What are the contributions that the study has made for research progress in this field? obtained make it possible to demonstrate the effectiveness of FNA versus FNB. It also contributes to comparing the use of EUS-FNA and EUS-FNB with and without ROSE, their differences in the role of obtaining adequate samples in patients with solid and non-solid lesions of the gastrointestinal tract. 7 Discussion. Does the manuscript interpret the findings adequately and appropriately, highlighting the key points concisely, clearly and logically? Are the findings and their applicability/relevance to the literature stated in a clear and definite manner? Is the discussion accurate and does it discuss the paper's scientific significance and/or relevance to clinical practice sufficiently? The discussion interprets the results sequentially. Suggests the elimination of the use of ROSE in the EUS-FNB. Describes the limitations in the use of EUS-FNA. In addition to the better performance of cell blocks with the use of FNB; This is similar to some successful ultrasound-guided sampling studies 8 Illustrations and tables. Are the



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figures, diagrams and tables sufficient, good quality and appropriately illustrative of the paper contents? Do figures require labeling with arrows, asterisks etc., better legends? The tables should describe that the size of the lesions is in millimeters. They complement 9 Biostatistics. Does the manuscript meet the requirements of biostatistics?. Yes 10 Units. Does the manuscript meet the requirements of use of SI units? Yes. Uses familiar and easy-to-understand international terminology 11 References. Does the manuscript cite appropriately the latest, important and authoritative references in the introduction and discussion sections? Does the author self-cite, omit, incorrectly cite and/or over-cite references? References cited with complete and current. It mentions the results obtained in meta-analyzes and other studies that compare the obtaining of tissue according to the size of the needle. The focus of the article is to investigate the use 12 Quality of manuscript organization and presentation. Is the of core biopsy manuscript well, concisely and coherently organized and presented? Is the style, language and grammar accurate and appropriate? The language of the manuscript is correct, orderly; the grammar is ordered and the number of words is adjusted to what is 13 Research methods and reporting. Authors should have prepared their manuscripts according to manuscript type and the appropriate categories, as follows: (1) CARE Checklist (2013) - Case report; (2) CONSORT 2010 Statement - Clinical Trials study, Prospective study, Randomized Controlled trial, Randomized Clinical trial; (3) PRISMA 2009 Checklist - Evidence-Based Medicine, Systematic review, Meta-Analysis; (4) STROBE Statement - Case Control study, Observational study, Retrospective Cohort study; and (5) The ARRIVE Guidelines - Basic study. Did the author prepare the manuscript according to the appropriate research methods and reporting? It is right. 14 Ethics statements. For all manuscripts involving human studies and/or animal experiments, author(s) must submit the related formal ethics documents that were reviewed and approved by their local ethical review committee. Did the manuscript



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meet the requirements of ethics? N/A First, what are the original findings of this manuscript? What are the new hypotheses that this study proposed? What are the new phenomena that were found through experiments in this study? What are the hypotheses that were confirmed through experiments in this study? The study findings are original. They confirm what has been described in other studies and it is the first study to compare the use of FNA and FNB with and are ROSE in solid lesions. It does not propose any new hypothesis to those already commented on in other studies. They clarify that in many cases it was not possible to obtain additional samples Second, what are the quality and importance of this manuscript? What are the new findings of this study? What are the new concepts that this study proposes? What are the new methods that this study proposed? Do the conclusions appropriately summarize the data that this study provided? What are the unique insights that this study presented? What are the key problems in this field that this study has solved? The quality of the manuscript is high. It emphasizes the importance that it is possible to eliminate the performance of ROSE in the samples obtained, if we have core needles. The conclusions are adequate and in accordance with the proposed objectives. It would be very interesting to know if the biospies obtained were sufficient or insufficient for neoplasic pathology of solid lesions; however this is not the objective of the study. The referenced articles are current and take into account the main references. The present study has an important sample of patients and confirms that core needles have better results, and surely in the future, other studies also mention it. Third, what are the limitations of the study and its findings? What are the future directions of the topic described in this manuscript? What are the questions/issues that remain to be solved? What are the questions that this study prompts for the authors to do next? How might this publication impact basic science and/or clinical practice? The only limitation of the study is its retrospective nature, however it defines concepts for a future randomized prospective



study. It has a good impact on clinical practice.