

PEER-REVIEW REPORT

Name of journal: *Artificial Intelligence in Gastrointestinal Endoscopy*

Manuscript NO: 79947

Title: The Kyoto classification of gastritis, virtual chromoendoscopy and artificial intelligence: Where are we going? What do we need?

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 02954019

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Associate Professor

Reviewer's Country/Territory: Japan

Author's Country/Territory: Italy

Manuscript submission date: 2022-09-14

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-09-15 14:49

Reviewer performed review: 2022-09-19 02:49

Review time: 3 Days and 11 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 Grade E: Do not publish
Language quality	<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
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Peer-reviewer statements	Peer-Review: [<input checked="" type="radio"/>] Anonymous [<input type="radio"/>] Onymous Conflicts-of-Interest: [<input type="radio"/>] Yes [<input checked="" type="radio"/>] No
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SPECIFIC COMMENTS TO AUTHORS

This is an interesting review concerning the future significance in the diagnosis of gastritis and gastric cancer using AI. Authors also referred to usefulness of the Kyoto classification and virtual chromoendoscopy in the endoscopic procedures. Previous reports were correctly cited and the benefits and limitation of Kyoto classification and virtual chromoendoscopy were well written. However, I consider that significance of AI should be referred considering in the following three points; 1) diagnosis of Hp, 2) stratification of gastric cancer risk, and 3) diagnosis of dysplasia and cancer. It would be better to add one section before conclusion and recommend discussing the above three points.

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Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 00069471

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Assistant Professor

Reviewer's Country/Territory: Japan

Author's Country/Territory: Italy

Manuscript submission date: 2022-09-14

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-09-16 02:50

Reviewer performed review: 2022-09-23 09:09

Review time: 7 Days and 6 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
Language quality	<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
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SPECIFIC COMMENTS TO AUTHORS

In this review article, authors summarized much valuable information regarding Kyoto classification system of chronic gastritis, a variety of image-enhanced endoscopy techniques and AI-assisted endoscopic diagnosis. Minor comments: 1. In this manuscript authors explained about TXI, like 'current endoscopic systems do not have the autofluorescence imaging function. On the contrary, texture and color enhancement imaging, designed to enhance three image factors in WLI (texture, brightness, and color) in order to clearly define subtle tissue differences, is available.' It is difficult to understand why TXI can replace AFI, so please add a more detailed explanation.