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ESPS Peer-review Report
Name of Journal: World Journal of Gastroenterology
Ms: 2591
Title: Difficult Polypectomy (Giant Hypopharyngeal Polyp): Case Report and Literature Review.
Reviewer code: 02439781
Science editor: x.z.huang@wjgnet.com
Date sent for review: 2013-03-03 18:10
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CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[ ] Grade A (Excellent)	[ ] Grade A: Priority Publishing	Google Search:	[ ] Accept
[Y] Grade B (Very good)	[Y] Grade B: minor language polishing	[ ] Existed	[ ] High priority for publication
[ ] Grade C (Good)	[ ] Grade C: a great deal of language polishing	[ ] No records	
[ ] Grade D (Fair)		BPG Search:	[ ]Rejection
[ ] Grade E (Poor)	[ ] Grade D: rejected	[ ] Existed	[Y] Minor revision
		[ ] No records	[ ] Major revision

COMMENTS

COMMENTS TO AUTHORS:

Comments to Authors Abstract 1. The English, syntax and grammar needs some improvement and rephrasing. a. For example: “In most cases, they are completely asymptomatic; however, despite the rarity of these tumors, interest in giant esophageal polyps derives from their degree of growth (characterized by slow growth into the esophageal lumen) and their mobility” i. What are the authors trying to convey? it is not clear. Why is the slow growth interesting, it is normal for benign polyps to grow slowly usually b. E.g. “The removal of these giant polyp is recommended” should be The removal of these giant polyps is recommended” 2. I get the message in general as a normal report of an interesting case but its fails to accurately capture and summarize what the authors wish to report specifically? A case report needs to highlight an interesting element or they need to highlight a learning point from the case. i. Otherwise, it will rank low I publication priority Introduction 1. The syntax and grammar needs some improvement and rephrasing. To name a few: E.g. a. There are too many information displayed in brackets. Authors ideally should integrate the relevant and important information in to sentences to facilitate reading and flow of the information. Kindly try to keep the brackets to minimum and only when it is necessary. 2. Most readers may not be familiar with this seldom used and vague phrase of : “neoformation” . Please substitute or rephrase to illustrate clearly what the authors mean. a. Does it mean polyp, irregular mucosa or tumor? 3. The introduction should be expanded and provide more background to illustrate why the authors chose to do a report of this case and which aspect they

wish to highlight, their management pearls or what aspects of this unique case is so interesting or educational about this rare but well reported condition. Case report 1. It is not clear and vague if the diagnosis was missed during the 1st endoscopy and what surgery was offered and why the patient refused. During the gastroscopy at the authors' institution, was the diagnosis already suspected and the gastroscopy was performed to confirm the suspicion or what is the purpose of it? Was biopsy performed and endoscopy pictures will be very useful here. a. These information will add value, paint a clear train of thought and readers will be interested. 2. What are the patient's symptoms beside anemia? Any dysphagia, loss of weight pain or pharyngeal globus? 3. Does the "esophageal stenosis' a real stenosis or just the polyp occupying the most of the lumen so it appears like a stenosis but it is actually just a mass occupying the luminal space. 4. In view of the CT findings, what is the indication of yet another endoscopy with endoluminal U/S? a. Please elaborate on authors' use and findings of endocspic endoluminal U/S i. Endoscopic ultrasound can identify the origin of the tumor and the extent of tumor and can help to differentiate it from leiomyoma ii. Mishra PK, Goel N, Saluja SS et al. Management of giant fibrovascular polyp of esophagus.Am Surg. 2012 Dec;78(12):E538-40. 5. In view of its size and known potential hazards of airway occlusion during regurgitation and withdrawal of the endoscope, was the endoscopy performed in a routine outpatient endoscopy suite/office or was it performed in the operating room with anesthetist or airway specialist standby? a. Please comment 6. "The patient was taken to the operating room and, under general anesthesia, a gastroscopy was repeated." a. Is this a planned surgery with full informed consent taken before endoscopy with the U/S. Yet another gastroscopy was performed, please educate the readers. i. Is the gastroscopy performed by the primary surgeon who is supposed to resect the lesion or was the endoscopy all performed by different doctors? 7. "The patient underwent a left cervicotomy and polyp dissection via a pharyngotomy. The removal of t