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## ESPS Peer-review Report

**Name of Journal:** World Journal of Gastroenterology

**ESPS Manuscript NO:** 4412

**Title:** Intraductal Papillary Neoplasm of the Bile Duct

**Reviewer code:** 01150514

**Science editor:** Song, Xiu-Xia

**Date sent for review:** 2013-06-29 22:21

**Date reviewed:** 2013-07-14 15:53

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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 type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input checked="" type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input checked="" type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

## COMMENTS TO AUTHORS

This is a useful addition to the international literature of this rare premalignant with high malignant potential condition (IPNB). The manuscript needs the following to become a better read and more useful to the readership. a) The authors need to tabulate some of the text specifically histopathology immunophenotypic profile (page 4-5). The cytokeratin and MUC profiles of the 4 subtypes of IPNB lend themselves to a table b) the Imaging features and the separate imaging techniques should also be tabulated in terms of usefulness and accuracy c) The references need to be reviewed and corrected (as an example the primary author Yeh TS (ref 6 and 18) is not quoted in the text rather the final author appears Chen MF and some other similar inaccuracies need to be corrected) d) A bit more detail from the references is also useful for example page 5 laboratory tests reference 9 the data of the CA19-9 association with bilirubin elevation biliary obstruction or elevated Alk Phos would be useful extra data to assess the usefulness of CA19-9. Similarly the statement about the ALT (same page) of > 36U/L as the only independent factor should have sensitivity and specificity data appended (or calculated if necessary) and a critical assessment of why this should be as the statement generally seems dubious. e) Some mistakes in the acronyms need to be corrected (e.g MUJC2 in stead of MUC2) --POCS is percutaneous and not peryutaneous etc...a page of acronyms and what they stand for would be useful f) Greater expansion of the surgical procedure and methodology of the staged biopsies and frozen section approach (e.g. path characteristics of the frozen biopsy) and the incidence of skip lesions still being missed despite this approach would be useful. g) the staging survival data could be more useful in a figure that demonstrated Kaplan Meier curves of survival according to depth and percentage of invasive component

**ESPS Peer-review Report**

**Name of Journal:** World Journal of Gastroenterology

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**Title:** Intraductal Papillary Neoplasm of the Bile Duct

**Reviewer code:** 01559599

**Science editor:** Song, Xiu-Xia

**Date sent for review:** 2013-06-29 22:21

**Date reviewed:** 2013-07-15 08:21

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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"/> Existed	<input checked="" type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	
<input type="checkbox"/> Grade D (Fair)		BPG Search:	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Minor revision
		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

**COMMENTS TO AUTHORS**

This review article is well-written. New findings are evaluated fairly. However, I think that appropriate figures help readers' understanding of this characteristic and rare disease. It is desirable for typical cholangiography with pathological images to be shown, especially in IPNB with mixed pathological transformations. Minor comments #1: page 3, line 15th; clinicopathologically (clinicopathological) #2: page 4, line 26th; paipillary (papillary) #3: page 7, line 23th; pervutaneous (percutaneous) #4: page 9, line 1st; shoud (should) #5: page 9, line 31st; coagulation (coagulation)