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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 3879

Title: Endoscopic diagnosis of cervical esophageal heterotopic gastric mucosa with conventional and narrow-band images

Reviewer code: 00503623

Science editor: Song, Xiu-Xia

Date sent for review: 2013-05-30 09:05

Date reviewed: 2013-07-12 22:54

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input checked="" type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input 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	<input type="checkbox"/> Existed	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

The manuscript provides data as to the clinical usefulness of NBI endoscopy over that of CI in the identification of HGM. This is a thorough and well presented paper clearly demonstration validation of diagnostic yield of NBI. However, the statement as to the IRB approval of the study is missing.



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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 3879

Title: Endoscopic diagnosis of cervical esophageal heterotopic gastric mucosa with conventional and narrow-band images

Reviewer code: 02519158

Science editor: Song, Xiu-Xia

Date sent for review: 2013-05-30 09:05

Date reviewed: 2013-07-19 15:50

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 checked="" type="checkbox"/> Grade B (Very good)	<input checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input 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)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

The topic of this article is interesting, because diagnosis of heterotopic gastric mucosa, which may be origin of clinically significant esophagus disorders, including malignant transformations, is an important question of contemporary gastroenterology. This article brings useful information for gastroenterologists who need precise and sensitive tool for HGM detection and characterization. This report is well-designed and is written with a limpid style. Clinical procedures and statistical analysis are described in detail. Both text and tables have a lucid, logical structure, and legend of tables and of figure is clear. I suggest to supplement references with recent literature, such as: 1) Rosztóczy et al. Dis Esophagus 2012; 25: 498-504; 2) Utey DS & Wallace MP. US Patent App. 13/438,652, 2012; 3) Chong VH. World J Gastroenterol. 2013; 19: 331-338; 4) Latos et al. Contemp Oncol 2013; 17: 171-175, and to define precisely the term "dysplasia" in line 4 of page 12, because this term can be understood in different ways. In line 1 from the bottom of page 6 the word "variable" should be removed (see enclosed manuscript with reviewer's corrections). In general, this study is a well-written and interesting piece of work. Therefore, I recommend it after minor corrections for publication in World Journal of Gastroenterology.



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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 3879

Title: Endoscopic diagnosis of cervical esophageal heterotopic gastric mucosa with conventional and narrow-band images

Reviewer code: 00506058

Science editor: Song, Xiu-Xia

Date sent for review: 2013-05-30 09:05

Date reviewed: 2013-07-19 19:06

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

COMMENTS TO AUTHORS

Title: Endoscopic diagnosis of cervical esophageal heterotopic gastric mucosa with conventional and narrow-band images
 Reviewer comments The authors compared narrow-band imaging endoscopy over conventional imaging endoscopy for their ability to detect heterotopic gastric mucosa in the cervical esophagus in patients undergoing an esophagogastroduodenoscopy. The findings of the study suggest that narrow-band imaging endoscopy is superior to in detecting such lesions. The major limitation of the study, however, is that the two procedures were applied on two different patient populations. i.e., the same patients were not subjected to the two procedures so that sound conclusions could be obtained. This could have been done for example during a follow up (which surely patients undergoing endoscopy do it) in one patient population only. With the present design of the study it is difficult to compare the two procedures.