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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 6270

Title: Outcomes of total embolization of the main splenic artery for patients with splenic artery aneurysms normal spleen

Reviewer code: 00211908

Science editor: Cui, Xue-Mei

Date sent for review: 2013-10-12 15:37

Date reviewed: 2013-10-13 14:48

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Y] Accept
<input type="checkbox"/> Y] Grade B (Very good)	<input type="checkbox"/> Y] 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	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

ESPS Manuscript NO: 6270 Title: Outcomes of total embolization of the main splenic artery for patients with splenic artery aneurysms normal spleen. This is a retrospective comparative study of two embolization techniques of 35 patients, divided into two groups (group A, n=16 and group B, n=19). The manuscript is well organized with good readability. There some comments on typographic issues: Page 2: Abstract section: Please mention the number of patients included in each group. Line 9: the percentage of patients having post-embolization syndrome is 6/16; 38%): please confirm or comment. Page 3: Line 8: patients instead of patents. Line 9: "...employed to produce complete occlusion of the SAAs". Page 4: Line 3: The diagnosis of SAAs ...instead of The diagnostic? Line 14: Forty-one instead of 41. Page 6: Line 23: Please describe PVP. The abbreviation should be cited full out for the first time mentioned in the text. Page 7: Results section: Line 17: (6/16; 38%): please confirm or comment. Page 8: Line 17: Please delete after the procedures: it is typed twice. Page 10: Line 15: used instead of use. Line 16: ...the latter instead of the later. Lines 16, 17 and 18: "In this study, although, shrinkage of the splenic volume in group A was obtained after total embolization of the main splenic artery, no mortality occurred, and the complications were under control.": Please specify how you were able to control the complications. Page 11: Line 1: "differences in liver function..." instead of "differences liver function...". Line 5: "decrease" instead of "decreased". Line 6: "reason may be attributed to .." instead of "reason may attribute to .."???. Line 9: Please rephrase this sentence ... and the patient population was relatively small preventing us from generalizing our results.



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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 6270

Title: Outcomes of total embolization of the main splenic artery for patients with splenic artery aneurysms normal spleen

Reviewer code: 01560070

Science editor: Cui, Xue-Mei

Date sent for review: 2013-10-12 15:37

Date reviewed: 2013-10-25 15:55

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

This paper presented the influence of splenic arterial embolization upon the post-procedural change in splenic size. I have some questions and comments as follows. Title: #1. This title "Outcomes of total embolization of the main splenic artery for patients with splenic artery aneurysms normal spleen" has a grammatical error. The word "and" is needed between "splenic artery aneurysms" and "normal spleen". Keywords: OK. ABSTRACT Aim: OK. Methods: #2. Each number of Group A and B should be added. #3. The methods how to evaluate the outcomes including the interval of follow-up CT should be concisely described. Results: OK. Conclusions: #4. This conclusion might mislead readers. Embolization of the main splenic artery is permissible treatment in some cases, however, there aren't enough data to indicate the usefulness and safety of this treatment in the present study. If the authors intend to state this conclusion, strict indication criteria of this treatment and the therapeutic effect should be analyzed and noticed. Introduction #5. In the first paragraph, the general risks of rupture of SAA such as diameter and shapes must be introduced. Moreover, specific percentage of a mortality rate after rupture is better to be mentioned. Materials and Methods Patients #6. What were the indication criteria for embolization? #7. The diameters of SAAs have to be described. Coil embolization #8. The criteria to select which treatment (sac packing or splenic arterial embolization) should be described. #9. The author described coils and/or gelform were used as embolization materials. What were the situations needed gelform? #10. In the second from the last sentence, the word "coeliac" should be correct. #11. Were balloon catheter or stent used for aneurysmal neck-plasty in the cases with sac packing? Postoperative outcome evaluation #12. In the second from the last sentence of the second paragraph (The infracted splenic volume...), the



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word “infracted” should be corrected. #13. In the final part of the second paragraph, the information of splenic infarction rate is described. These data are better to be written in detail in the Results section and Table 2. #14. What is PVP (in the final sentence)? Results #15. The status of aneurysms found in follow-up CT (e.g. changes in size, possible presence of recanalization or coil compaction) should be analyzed. #16. As I commented in #13, the data of splenic infarction rate in both groups are important and better to be added. Discussion #17. This article lacks the information of the status of aneurysms after treatment. If the therapeutic effects have no difference between sac packing and splenic arterial embolization, sac packing might be preferred because that can maintain original circulation. The authors should indicate the lesions which could not be treated without splenic arterial embolization in detail. Without these data, usefulness of splenic arterial embolization could not be stated. Table #18. The information of the size of SAAs in both groups should be added in Table 1. #19. As I commented in #13, the data of splenic infarction rate in both groups is better to be added in Table 2. Figure #20. The information about which group the patient belongs to should be added in the Figure captions or legends. #21. Both patients of Fig. 1 and 2 are from Group A. Figures of the patient from group B is also better to be shown. #22. The slice levels of Fig. 1C and 1D are different, so it is inadequate to compare the splenic sizes.



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ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 6270

Title: Outcomes of total embolization of the main splenic artery for patients with splenic artery aneurysms normal spleen

Reviewer code: 01212650

Science editor: Cui, Xue-Mei

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Date reviewed: 2013-10-26 21:08

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 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"/> Rejection
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<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

I have reviewed the manuscript: "Outcomes of total embolization of the main splenic artery for patients with splenic artery aneurysms normal spleen". Base on previous studies, splenic artery aneurysms that are symptomatic, enlarging, more than 2 cm in diameter or those detected in pregnancy, childbearing age or following liver transplantation are at high risk of rupture and should undergo active treatment. The primary therapeutic approach should be endovascular therapy by either embolization or stent grafting. Transcatheter embolization of splenic artery aneurysms is safe and effective and may induce less morbidity than open surgery. However, a concern for splenic insufficiency exists after main splenic artery embolization. Below are some of the comments on this manuscript. Major recommendation: This is a retrospective study, included 35 patients who presented with splenic artery aneurysms and normal spleen. The topic is interested but may need some revisions. 1. Need language corrections by a native English speaker. 2. The title "Outcomes of total embolization of the main splenic artery for patients with splenic artery aneurysms normal spleen" could be adjusted as "Outcomes of total embolization of the main splenic artery for patients with splenic artery aneurysms and normal spleen". 3. The authors mentioned in the Results section: "Follow-up clinical results and Changes in splenic volume after embolization" may make readers confused. I highly suggested the statements in these two paragraphs should be rephrased. 4. "First paragraph in the Discussion section "stated" There are four main findings from this study:", however, the statements were not clear and easily confused. I would suggest the statement in this paragraph should be rephrased. 5. Table 1: There were some confused data such as complications, This should be rechecked. Complications Minor complications 0.245 Post-embolizationsyndrome 6



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(77.8) 3 (100 %) Minor recommendation: 1. Page 4, line 3: "The diagnostic of SAAs..." should be corrected as "The diagnosis of SAAs..." 2. Page 4, line 20: " with CT and clinical follow-ups of < 1 years in 8 patients..." should be corrected as " with CT and clinical follow-up < 1 year in 8 patients..." 3. Page 4, line 23: " Demographic and Clinical presentation of these patients..." should be corrected as " Demographics and clinical presentations of these patients..." 4. Page 6, line 23: Any potential complications following PVP.... What does the PVP mean?? 5. Page 8, line 17: " Result section:follow-up point after the procedures after the procedures." should be corrected as "follow-up point after the procedures." 6. Page 9, line 3-5: "There were significantly differences in splenic volume between the two groups at each follow-up point, and there were also significantly differences in splenic volume in group A between preoperatively and each follow-up point." This sentence is incomprehensible and must be rephrased. 7. Page 11, line 8-10: " Discussion section: First, the study was a restrospective study, and the patient population was relative small prevents us from, which may prevent us from generalizing our results. " this sentence is incomprehensible and must be rephrased.