

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 6550

Title: The role of endoscopic ultrasound in the diagnosis and management of intraductal papillary mucinous neoplasms of the pancreas

Reviewer code: 00070310

Science editor: Ma, Ya-Juan

Date sent for review: 2013-10-24 11:38

Date reviewed: 2013-10-28 08:51

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	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input checked="" type="checkbox"/> Grade D (Fair)	language polishing	BPG Search:	<input checked="" 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 paper reviewed the role of EUS for IPMN. Unfortunately, this paper did not receive a high enough for publication. For pancreatic cystic neoplasms, International Consensus Guideline 2012 for the Management of IPMN and MCN of the Pancreas was published, which summarized the previous important papers. On the other hand, there were not new findings in this paper compared with the Guideline.

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 6550

Title: The role of endoscopic ultrasound in the diagnosis and management of intraductal papillary mucinous neoplasms of the pancreas

Reviewer code: 00058353

Science editor: Ma, Ya-Juan

Date sent for review: 2013-10-24 11:38

Date reviewed: 2013-10-30 22:30

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input checked="" type="checkbox"/> Grade A (Excellent)	<input checked="" type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input 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	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	language polishing	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

It's a very comprehensive review with an extense and updated literature cited.

ESPS Peer-review Report

Name of Journal: World Journal of Gastroenterology

ESPS Manuscript NO: 6550

Title: The role of endoscopic ultrasound in the diagnosis and management of intraductal papillary mucinous neoplasms of the pancreas

Reviewer code: 00253959

Science editor: Ma, Ya-Juan

Date sent for review: 2013-10-24 11:38

Date reviewed: 2013-11-07 18:41

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 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

This paper is a very well written review on the role of endoscopic ultrasound in the diagnosis and management of intraductal papillary mucinous neoplasms of the pancreas. All important references are cited. There are a few specific points which should be considered: Page 7, Classification into MD-IPMN and ..., second paragraph, second line: Not "dust" but "duct". Page 9, The role of contrast-enhanced EUS in IPMNs: In this chapter you should mention more precisely which sort or material of chemical is used for contrast EUS. Page 10, first paragraph, fourth line from the bottom: "same authors". Page 10, The role of EUS-FNA, fifth line: It is not quite clear to me why you mention here the measurement of amylase. Amylase measurement in the pancreatic juice or cyst fluid does not help in any differential diagnosis. Page 12, second paragraph, fifth line: Please explain the abbreviation GNAS. In general in this long chapter about the role of EUS-FNA you mention various parameters which have been measured and evaluated in sensitivity, specificity, positive protective value etc. In the summary of this chapter you should make it quite clear for the reader which parameters are a "must" for characterising and defining the role of pancreatic cysts or IPMN and which parameters are at present still in the experimental state. From the reading before it seems to me that neither cytology nor measurement of tumour markers or DNA analysis in the case of a negative result are a reliable tool for a definite diagnosis or for excluding a diagnosis! Page 13, Intraductal ultrasonography. After having read this chapter, I have concluded for myself that at present intraductal ultrasonography has no firm role in the differential diagnosis of IPMN or MD-IPMN. If not, please be more precise. Figures: Fig. 1: Please explain the abbreviation UP in the figure legend. Fig. 2: Please include in brackets (PD) at the end of the figure legend. Fig. 4: Please clarify in the



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figure legend how you stained the mucinous material and what we should see. References: Please check all references very carefully. There are some references in which I did not find the year of publication (ref. 70, 71, 81, or 82).