



**ESPS PEER-REVIEW REPORT**

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

**ESPS manuscript NO:** 16541

**Title:** Low yield of routine duodenal biopsies for evaluation of abdominal pain

**Reviewer’s code:** 00253974

**Reviewer’s country:** Germany

**Science editor:** Ya-Juan Ma

**Date sent for review:** 2015-01-22 09:03

**Date reviewed:** 2015-02-05 06:24

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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"/> The same title	<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"/> Duplicate publication	<input checked="" type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input checked="" type="checkbox"/> Grade E: Poor		[Y] No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		[Y] No	

**COMMENTS TO AUTHORS**

This manuscript refers to the diagnostic impact of biopsy in patients with macroscopically normal appearing duodenal mucosa. On first sight the study has a appropriate study design even though the retrospective monocentre study design reduces slightly the impact of the study. The number of 300 enrolled patients is sufficient. As national guidelines, e.g. the ACG guideline, for celiac disease recommend, duodenal biopsy should only be performed as a diagnosis conformation after seropositive proof with little exceptions. This is in accordance to the primary endpoint of the submitted study. Nevertheless its clinical importance moderate: no answer is given which patients should be selected for biopsy if the duodenal mucosa appears inconspicuous. Unfortunately the presented data are rare: no details concerning the quality of the performed biopsies are mentioned. How many biopsies per patient have been taken? Have all duodenal sectors been considered for biopsy, e.g. bulbus, middle and lower duodenum? Have random samples been sent to a pathology reference service? Due to the low diagnostical findings as well as the low amount of collected data the statistics are poor. Besides formal aspects are appropriate: the text is well structured and well legible, the title as well as the abstract outline the study’s main topic and in its retrospective design



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no ethical issues do exist. Summing up the study lacks a proper set up and gives no little clinical or scientific impulses and information. The collected data are inadequate and therefore I would recommend rejecting it.



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## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 16541

**Title:** Low yield of routine duodenal biopsies for evaluation of abdominal pain

**Reviewer's code:** 00227386

**Reviewer's country:** United Kingdom

**Science editor:** Ya-Juan Ma

**Date sent for review:** 2015-01-22 09:03

**Date reviewed:** 2015-01-24 01:46

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" 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"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
	<input type="checkbox"/> Grade D: Rejected	BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

### COMMENTS TO AUTHORS

This information is helpful in showing that routine duodenal biopsies on normal looking duodenal mucosa without indications are of little diagnostic value. In the Abstract under Methods and also in the Results section the authors need to make it clearer that the 183 patients with abdominal pain only are just a subgroup of the total of 300 patients and not a separate group. This however is clear on referral to Table 1. In the Discussion the first abbreviation ACG needs to be given its full title.



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## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 16541

**Title:** Low yield of routine duodenal biopsies for evaluation of abdominal pain

**Reviewer's code:** 03031150

**Reviewer's country:** Italy

**Science editor:** Ya-Juan Ma

**Date sent for review:** 2015-01-22 09:03

**Date reviewed:** 2015-01-23 15:43

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

### COMMENTS TO AUTHORS

Dear Author, very interesting job with great casuistry. Main drawback remain the absence of assessment if abdominal pain improved as a result of identifying duodenal pathology during the follow up period.