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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 17681

Title: Recent advances in endoscopic ultrasonography-guided biliary interventions

Reviewer's code: 02823085

Reviewer's country: Egypt

Science editor: Yuan Qi

Date sent for review: 2015-03-19 09:54

Date reviewed: 2015-04-06 17:53

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

1- there is no references for the tables in the manuscript. 2- in the chapter " EUS-guided biliary intervention techniques" there is repetition. 3-under the chapter " EUS-guided rendezvous procedure" .. (figure 4) should be moved earlier to be after : transhepatic and transduodenal. and please elaborate more about the long and short scope positions



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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 17681

Title: Recent advances in endoscopic ultrasonography-guided biliary interventions

Reviewer's code: 03271124

Reviewer's country: Thailand

Science editor: Yuan Qi

Date sent for review: 2015-03-19 09:54

Date reviewed: 2015-04-01 15:18

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 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

To Authors This review article provided the helpful data in recent advanced procedures in the endoscopic biliary intervention field. Especially in every kind of procedure. The title ,abstract and introduction was acceptable Discussion Comments 1. Could you describe the step by step in each procedure with picture? 2. Should clearly address the indication and contraindication in each procedure. Is there any special consideration in each procedure? 3. Some procedure have high complication rate. More discussion about critical step to prevent the complication would be excellent. 4. The table to compare the important point of each procedure would be helpful. Minor point. 1. The complication rate in EUS-CDS reported 9-19% (might be up to 23% from Reference 10) 2. Reference 11 has not been reported EUS-CDS as first line of treatment