

## ESPS PEER REVIEW REPORT

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

**ESPS manuscript NO:** 14183

**Title:** Endoscopic Cyanoacrylate Injection for the Treatment of Gastric Varices in Children

**Reviewer code:** 01438500

**Science editor:** Su-Xin Gou

**Date sent for review:** 2014-09-23 19:13

**Date reviewed:** 2014-10-13 14:51

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<input checked="" 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"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

## COMMENTS TO AUTHORS

Comments on the article This article described the therapeutic results of endoscopic obliteration using cyanoacrylate (Histoacryl) for gastric variceal bleeding in children. Endoscopic cyanoacrylate injection technique has been well accepted procedure for gastric varices in adults. A small number of articles have been reported in the pediatric field. This article summarized 21 patients of gastric variceal bleeding treated by endoscopic cyanoacrylate injection. This topics is interested in many readers, especially experts in this field. This article has been well written and favorable impression. However, a minor concern arose as mentioned below. Problems: 1. Concentration of cyanoacrylate (Histoacryl) mixed Lipiodol noted in page 5: Each injection consisted of 0.1-0.5 mL of 0.5 mL N-butyl-2-cyanoacrylate mixed with 0.5 or 0.8 mL Lipiodol (cyanoacrylate:Lipiodol=1:1 or 1:1.16). Is this a standard concentration in your institute? It seems to be low concentration. Usually we use cyanoacrylate:Lipiodol=1:1-2:1? 2. As the subjects/patients are children, height and body weight should be added in the text and Table. Furthermore, condition of concomitant esophageal varices should be described briefly.

## ESPS PEER REVIEW REPORT

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

**ESPS manuscript NO:** 14183

**Title:** Endoscopic Cyanoacrylate Injection for the Treatment of Gastric Varices in Children

**Reviewer code:** 02917470

**Science editor:** Su-Xin Gou

**Date sent for review:** 2014-09-23 19:13

**Date reviewed:** 2014-10-15 01:05

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<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
<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"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

## COMMENTS TO AUTHORS

This is a retrospective study of Cyanoacrylate injection for varices in the pediatric patients. The limitation was a small number of patients enrolled, however, interesting result. There are some points to be concern as the following; 1. The authors mentioned that one patient developed abdominal pain and distension following the procedure, what is the possibility of this symptoms? Could it be self-limited embolism, any CT scan of the abdomen (or other investigations) was performed to clarify the cause of this event? 2. because the procedure was done without fluoroscopy, the risk of embolization could be high. Does the author recommended to have this procedure done under fluoroscopic monitoring or just probing technique is enough? 3. Do all the enrolled patients underwent chest x-ray? Asymptomatic embolization from histoacryl injection was also mentioned in the adult, how about in the children? 4. Is there any patient had re-bleeding within 2 weeks after the procedure? And what is the cause of early re-bleeding?

## ESPS PEER REVIEW REPORT

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

**ESPS manuscript NO:** 14183

**Title:** Endoscopic Cyanoacrylate Injection for the Treatment of Gastric Varices in Children

**Reviewer code:** 00012969

**Science editor:** Su-Xin Gou

**Date sent for review:** 2014-09-23 19:13

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CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<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"/> Rejection
<input type="checkbox"/> Grade E: Poor	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Existing	<input checked="" type="checkbox"/> Minor revision
		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

## COMMENTS TO AUTHORS

Comments to the authors: In this case series, the authors report the results of endoscopic gastric variceal obturation by using cyanoacrylate injection in pediatric patients. Because there have been few reports regarding the treatment of gastric varices in pediatric patients, and cyanoacrylate is not widely approved for the use in pediatric patients, this case series may have value. It is well known in adults that fundal varices are the main indication for EVO. EVO may also be useful for GOV type 1 in pediatric patients, but the authors may have to compare the two types of gastric varices in terms of the injection volume, efficacy, and safety.