



ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology
ESPS manuscript NO: 24906
Title: Esophageal function after peroral endoscopic myotomy compared to other achalasia treatments
Reviewer's code: 00038617
Reviewer's country: Japan
Science editor: Yuan Qi
Date sent for review: 2016-02-14 10:16
Date reviewed: 2016-03-06 23:18

Table with 4 columns: CLASSIFICATION, LANGUAGE EVALUATION, SCIENTIFIC MISCONDUCT, CONCLUSION. It contains checkboxes for various quality grades and misconduct types like Google Search, Duplicate publication, and Plagiarism.

COMMENTS TO AUTHORS

In this study, the authors retrospectively compared the effectiveness of POEM with LHM and pneumatic dilation in improving esophageal function in achalasia. They assessed the physiological function of lower esophagus by timed barium esophagram and high resolution manometry. Their results revealed that all three treatment modalities are effective in improving esophageal function in a short term follow-up and there was no difference in efficacy, and POEM seems to be a treatment to perform for even those who have some risks for LHM, such as the elderly, those with abdominal surgical scars and those with prior failed LHM. This paper is well written overall. Since there is few study in this issue to date, this paper is valuable for publication. Comments (1) Title does not reflect the contents enough. For exam, "Efficacy of POEM compared with other treatments in improving esophageal function in achalasia". (2) In Methods of Abstract, following sentences are not necessary and should be deleted; "Our patients underwent TBE and HREM ----- SAS version 9.4 (Cary, NC) was used and p<0.05 was considered significant."



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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 24906

Title: Esophageal function after peroral endoscopic myotomy compared to other achalasia treatments

Reviewer's code: 00033377

Reviewer's country: United States

Science editor: Yuan Qi

Date sent for review: 2016-02-14 10:16

Date reviewed: 2016-03-08 11:03

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"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		BPG Search:	<input checked="" 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

The authors compare the efficacy of POEMS, laparoscopy, pneumatic dilation in the treatment of achalasia. The population is sufficiently large and as they mention in their limitations there is not enough clinical data to judge response but they use 2 outcomes that have corroborated with clinical response: manometry with integrated relaxation pressure >10 mm Hg and time barium emptying. Although there was statistical improvement in these 2 parameters with all treatment modalities as measured numerically, a comparison of the absolute number of patients that achieved these outcomes with each treatment modality may strengthen the study results.