

## ESPS PEER-REVIEW REPORT

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

**ESPS manuscript NO:** 27627

**Title:** Uncovering the uncertainty: Risk factors and clinical relevance of P1 lesions on small bowel capsule endoscopy of anemic patients

**Reviewer's code:** 02445515

**Reviewer's country:** United States

**Science editor:** Jing Yu

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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 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 type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input type="checkbox"/> No	

## COMMENTS TO AUTHORS

The authors should be commended to further define the significance of P1 vs P2 lesions found on wireless capsule endoscopy in the context of an IDA workup. All too many times we are faced with the challenge of how to interpret the significance of a "red spot" seen on wireless capsule endoscopy but there is a dearth of literature on advising the risk of a re-bleeding or how to properly manage the patient. When controlling for the Charleston index, the use of NSIADs appeared to be associated with a higher risk of P1 lesions translating to a 12 fold increased risk. Interestingly, P1 lesions did not have a higher risk of rebleeding whereas P2 lesions have a 36.8% rate. Moreover, from a management perspective, this study enlightens our awareness regarding NSAID use and its relationship to possible rebleeding risk. I also liked the algorithm presented by the authors.