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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 29906

Title: Heparin bridge therapy and post-polypectomy bleeding

Reviewer's code: 00028512

Reviewer's country: Japan

Science editor: Yuan Qi

Date sent for review: 2016-08-31 20:48

Date reviewed: 2016-09-01 02:47

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 checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<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"/> Duplicate publication	<input 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 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

I am very interested in the results of this retrospective study. I think the analysis is appropriate to a retrospective study. I have two concerns. One is that polypectomy should be described as hot snare polypectomy. Another one is that the cause for PPB should be explained in detail. The mechanism of PPB that authors speculate should be added.



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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 29906

Title: Heparin bridge therapy and post-polypectomy bleeding

Reviewer's code: 03646567

Reviewer's country: United States

Science editor: Yuan Qi

Date sent for review: 2016-08-31 20:48

Date reviewed: 2016-09-02 06:22

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> [Y] Accept
<input type="checkbox"/> [Y] Grade B: Very good	<input type="checkbox"/> [Y] 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 type="checkbox"/> [Y] No	<input 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 type="checkbox"/> [Y] No	

COMMENTS TO AUTHORS

In the patients who had stopped anticoagulation, had soon had they restarted anticoagulation after the procedure?

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 29906

Title: Heparin bridge therapy and post-polypectomy bleeding

Reviewer's code: 01800545

Reviewer's country: Japan

Science editor: Yuan Qi

Date sent for review: 2016-08-31 20:48

Date reviewed: 2016-09-08 13:10

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 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 type="checkbox"/> Minor revision
		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 showed that the PPB was associated with heparin bridging therapy. Patients who took antiplatelets during heparin bridging therapy showed the high incidence of PPB. This study is a new evidence about PPB. Major Comments (1) In Table 2, did the patients in "antiplatelets + heparin bridge" and "anticoagulants + heparin bridge" take antiplatelets or anticoagulants during heparin bridge? If so, please show the details of drugs. (2) ESD cases should be excluded for this analysis. (3) In Table 2, the number of patients in this study is 759. But the numbers of "polyp location", "polyp size", "Prophylactic clipping" are inconsistent. How many EMRs were performed? In addition, The numbers of patients with the use of antithrombotic agents are different from those of Table 2. The authors should correct them. (4) The results of univariate analysis should be shown in Table 3. Did the authors perform the analysis of risk factors for PPB per polyp or per patient? I recommend the analysis per polyp. (5) Recently, Ishigami et al. (Heparin-bridging therapy is associated with a high risk of post-polypectomy bleeding regardless of polyp size. *Dig Endosc.* 2016 Jul 1. doi: 10.1111/den.12692. [Epub ahead of print]) reported the incidence and characteristics of PPB in heparin bridging therapy. The authors should perform the analysis among patients with heparin



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bridging therapy. It will bring us a new and important information.