

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastroenterology

ESPS manuscript NO: 33319

Title: Sonographic appearance of the anal cushions of hemorrhoid

Reviewer's code: 03368130

Reviewer's country: France

Science editor: Ze-Mao Gong

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input checked="" 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 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

Thank you for your work, very interesting paper. I have some specific comments. Please give more technical details about the acquisition of the Doppler signal (especially the PRF ?). You need to edit the manuscript which is too long with some repetitions. Please can you discuss in the text the following papers: - The vascular nature of hemorrhoids. Aigner et al. J Gastrointest Surg. 2006 Jul-Aug;10(7):1044-50. - Miyamoto (2013), Visualization and hypervascularization of the haemorrhoidal plexus in vivo using power Doppler imaging transanal ultrasonography and three-dimensional power Doppler angiography. Colorectal Dis, 15: e686-e691. The ? Mosaic pattern ? sign is not really sensitive for stage I and II so it is difficult to argue that this sign could be relevant for early diagnosis. Please discuss.