

## PEER-REVIEW REPORT

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

**Manuscript NO:** 65657

**Title:** Cystic pancreatic lesions, the endless dilemma

**Reviewer's code:** 03477919

**Position:** Editorial Board

**Academic degree:** FEBS, MD, PhD

**Professional title:** Professor, Surgeon

**Reviewer's Country/Territory:** Turkey

**Author's Country/Territory:** Egypt

**Manuscript submission date:** 2021-03-17

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-03-18 15:01

**Reviewer performed review:** 2021-03-19 08:10

**Review time:** 17 Hours

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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#### **SPECIFIC COMMENTS TO AUTHORS**

With the improvement of imaging and endoscopic techniques incidental and asymptomatic or symptomatic cystic pancreatic lesions has been increased in daily practice Radiological and imaging modalities has been discussed in this review Please add an table including last randomized control studies. Also add an flow chart for readers tu use in diagnosing process of pancreatic cystic lesions

## PEER-REVIEW REPORT

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

**Manuscript NO:** 65657

**Title:** Cystic pancreatic lesions, the endless dilemma

**Reviewer's code:** 03479136

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Assistant Professor

**Reviewer's Country/Territory:** Italy

**Author's Country/Territory:** Egypt

**Manuscript submission date:** 2021-03-17

**Reviewer chosen by:** Man Liu

**Reviewer accepted review:** 2021-03-19 06:24

**Reviewer performed review:** 2021-03-28 11:59

**Review time:** 9 Days and 5 Hours

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

## **SPECIFIC COMMENTS TO AUTHORS**

Thank you for having the opportunity to review the manuscript entitled “Cystic pancreatic lesions, the endless dilemma”. This is an interesting review, aimed at discussing the diagnosis of cystic pancreatic lesions and the pros and cons of the different diagnostic options. Nevertheless, I would like to point out some concerns: - There is a high number of typos and format mistakes - Several studies have been cited in the text without appropriate references - Table 1 has been cited in the text in a way to let the reader assume that will be regarding Atlanta classification (also with the corresponding reference number 15) but then is a classification of all pancreatic cysts and linked to a different reference (number 23) - The Authors refer to EUS and FNA-EUS as a “challenge” and a “major concern”, it is not clear which challenge and major concern they are referring to and should be clarified. - The Authors state that EUS allows good visualization of the liver and plays a significant role in detecting small-sized liver metastasis and allows EUS-FNA sampling. This does not take into account the difficult access (or impossible) to detect and sample tissue from lesions located in the postero-superior segments - The section “Cystic lesions of the pancreas: types, diagnosis” could explained more clearly which cutoff values of which parameters assist in the differential diagnosis of the various cystic lesions. It would benefit from a table or a more structured text to help the readers - In the section “Imaging diagnosis of cystic lesions of the pancreas” the Authors mention the accuracy of CT and MRI in diagnosing pancreatic cysts, but do not report appropriate figures. - In the paragraph “Endoscopic diagnosis of cystic lesions of the pancreas” the Authors present a list of diagnostic approaches as follows: “For the diagnosis of cystic lesions of the pancreas, 3 approaches have been described: Diagnosis by endoscopic ultrasound that involves morphology of the cyst during EUS, 1- EUS-guided fine needle aspiration (EUS-FNA), EUS-guided fine nCLE, through the needle biopsy (TTNB), and contrast-enhanced harmonic EUS

(CH-EUS). 2- Endoscopic retrograde cholangiopancreatography (ERCP). 3- Single-operator cholangioscopy/pancreatoscopy.”. The sentence “Diagnosis by endoscopic ultrasound that involves morphology of the cyst during EUS” is not clear and is before the numbered list. The contrast-enhanced harmonic EUS (CH-EUS) has been listed at the beginning of the section but does not appear to be discussed in the text and on the other hand, the “EUS-guided radiofrequency ablation” section has not been mentioned before in the list and seems to be out of place. The Authors state to aim to review the diagnostic approaches, if they want to mention the treatment options, it should be done way more extensively. - The Authors cite twice a manuscript by Okasha et al, but is not clear what the Authors’ message is by citing this article just after saying that morphology at EUS is not sufficient to predict malignant potential of PCL and with no bibliographic reference (is one of the 4 self-citations). It seems to be cited twice in the text but with incongruous information from what stated in the section named “Cystic lesions of the pancreas: types, diagnosis”. Moreover, the sensitivity reported for cyst amylase level and defined as “low”, was over 80%. It results in contrasting and inaccurate information for the readers. - The paragraph “An international, multi-institution survey of the use of EUS in the diagnosis of pancreatic cystic lesions” appears to be too long and repetitive. Data regarding CEA, Ca 19-9, ... should be summarized otherwise will result extremely difficult for the reader to get a clear and effective take home message - Figure 2 appears to be inappropriately reporting patient sensitive data