

## PEER-REVIEW REPORT

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

**Manuscript NO:** 72843

**Title:** Prednisolone induced pneumatosis coli and pneumoperitoneum

**Provenance and peer review:** Unsolicited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 00289471

**Position:** Editorial Board

**Academic degree:** MD

**Professional title:** Doctor, Medical Assistant

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

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

**Manuscript submission date:** 2021-10-30

**Reviewer chosen by:** Jia-Qi Zhu

**Reviewer accepted review:** 2022-03-18 12:35

**Reviewer performed review:** 2022-03-20 17:21

**Review time:** 2 Days and 4 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<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
Conclusion	<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
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Peer-reviewer	Peer-Review: <input type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous

statements

Conflicts-of-Interest: [ ] Yes [Y] No

## SPECIFIC COMMENTS TO AUTHORS

The proposed modified score is interesting and probably of good clinical value. Here are some remarks: 1. In the abstract it is stated that PI is a pathognomonic radiologic sign of bowel ischemia, this not true, like the authors say immediately after. 2. I guess that pneumoperitoneum is a sign of abdominal pathology, so point the first criterium for modification of the score is not respected in this case. 3. Table 1: imaging studies did not rule out perforation. 4. Table 1: there were dysphagia at the onset of symptomatology. 5. Table 1: PI is observed in a wide range of situation, mat also be idiopathic, it is very difficult to rule out alternative causes. 6. There is no reference for table 1 in the text. 7. Pneumoperitoneum is underestimated, probably the authors refers it to PI, in this case there should be a minimal discussion about it. 8. There are small writing errors (some spaces are missing between words).