

PEER-REVIEW REPORT

Name of journal: *World Journal of Gastroenterology*

Manuscript NO: 79954

Title: How to avoid overtreatment of benign colorectal lesions: rationale for an evidence-based management

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 00035227

Position: Peer Reviewer

Academic degree: MD

Professional title: Associate Professor

Reviewer's Country/Territory: Canada

Author's Country/Territory: Spain

Manuscript submission date: 2022-09-13

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-09-13 17:22

Reviewer performed review: 2022-09-13 18:15

Review time: 1 Hour

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<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
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 statements	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

This is an excellent manuscript Well written, clear and concise Message is novel and important and well presented. I think the manuscript could be improved by adding recent literature showing the improvement of EMR technology through different margin ablation approaches and how they reduce recurrence rates, achieve (in expert hands) high success rates while guarding low procedure times and low complication rates. This even more strengthens the point of using EMR over surgery but makes referral to expert centers using this technology more mandatory Recent papers like: 1. Gastrointest Endosc. 2022 Jun 17:S0016-5107(22)01769-2. doi: 10.1016/j.gie.2022.06.018 2. <https://dx.doi.org/10.3748/wjg.v28.i29.4007> Should be mentioned and discussed Furthermore, the last third of the manuscript is a bit long and should be shortened a bit.

Checklist below. Overall congratulations to the author. Great work! 1 Title. Does the title reflect the main subject/hypothesis of the manuscript? yes 2 Abstract. Does the abstract summarize and reflect the work described in the manuscript? yes 3 Key words. Do the key words reflect the focus of the manuscript? yes 4 Background. Does the manuscript adequately describe the background, present status and significance of the study? yes 5 Methods. Does the manuscript describe methods (e.g., experiments, data analysis, surveys, and clinical trials, etc.) in adequate detail? yes 6 Results. Are the research objectives achieved by the experiments used in this study? What are the contributions that the study has made for research progress in this field? yes 7 Discussion. Does the manuscript interpret the findings adequately and appropriately, highlighting the key points concisely, clearly and logically? Are the findings and their applicability/relevance to the literature stated in a clear and definite manner? Is the



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discussion accurate and does it discuss the paper's scientific significance and/or relevance to clinical practice sufficiently? yes 8 Illustrations and tables. Are the figures, diagrams and tables sufficient, good quality and appropriately illustrative of the paper contents? Do figures require labeling with arrows, asterisks etc., better legends? yes 9 Biostatistics. Does the manuscript meet the requirements of biostatistics? NA 10 Units. Does the manuscript meet the requirements of use of SI units? No 11 References. Does the manuscript cite appropriately the latest, important and authoritative references in the introduction and discussion sections? Does the author self-cite, omit, incorrectly cite and/or over-cite references? See comments above 12 Quality of manuscript organization and presentation. Is the manuscript well, concisely and coherently organized and presented? Is the style, language and grammar accurate and appropriate? yes 13 Research methods and reporting. Authors should have prepared their manuscripts according to manuscript type and the appropriate categories, as follows: (1) CARE Checklist (2013) - Case report; (2) CONSORT 2010 Statement - Clinical Trials study, Prospective study, Randomized Controlled trial, Randomized Clinical trial; (3) PRISMA 2009 Checklist - Evidence-Based Medicine, Systematic review, Meta-Analysis; (4) STROBE Statement - Case Control study, Observational study, Retrospective Cohort study; and (5) The ARRIVE Guidelines - Basic study. Did the author prepare the manuscript according to the appropriate research methods and reporting? NA 14 Ethics statements. For all manuscripts involving human studies and/or animal experiments, author(s) must submit the related formal ethics documents that were reviewed and approved by their local ethical review committee. Did the manuscript meet the requirements of ethics? NA

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Name of journal: *World Journal of Gastroenterology*

Manuscript NO: 79954

Title: How to avoid overtreatment of benign colorectal lesions: rationale for an evidence-based management

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03724397

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Chairman, Chief Doctor, Director, Professor

Reviewer's Country/Territory: China

Author's Country/Territory: Spain

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Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-09-15 02:21

Reviewer performed review: 2022-09-25 17:13

Review time: 10 Days and 14 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<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
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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Peer-reviewer statements	Peer-Review: [<input type="checkbox"/>] Anonymous [<input checked="" type="checkbox"/>] Onymous Conflicts-of-Interest: [<input type="checkbox"/>] Yes [<input checked="" type="checkbox"/>] No
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SPECIFIC COMMENTS TO AUTHORS

I have read with great interest the review: how to avoid overtreatment of benign colorectal lesions. I find the manuscript well written. 1. Most of the evidence that will be reviewed here focus on endoscopic mucosal resection (EMR) , however, endoscopic submucosal dissection (ESD) is also widely used in the treatment of benign colorectal diseases, and this evidence can be appropriately added. 2. A new mode of endoscopic therapy - patients are admitted to surgery, and endoscopic therapy is completed under general anesthesia of tracheal intubation with the help of surgeons in the operating room. If there is bleeding or perforation beyond the control of endoscopy during the operation, or the lesion cannot be completely removed, convert to laparoscopy or laparotomy. Whether the relevant research of this new mode of endoscopic therapy needs to be included in the review, please reevaluate.

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Title: How to avoid overtreatment of benign colorectal lesions: rationale for an evidence-based management

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 00057299

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Professor

Reviewer's Country/Territory: South Korea

Author's Country/Territory: Spain

Manuscript submission date: 2022-09-13

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-09-14 05:16

Reviewer performed review: 2022-09-26 11:13

Review time: 12 Days and 5 Hours

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

Peer-reviewer statements	Peer-Review: [<input checked="" type="radio"/>] Anonymous [<input type="radio"/>] Onymous Conflicts-of-Interest: [<input type="radio"/>] Yes [<input checked="" type="radio"/>] No
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SPECIFIC COMMENTS TO AUTHORS

The present opinion review is very interesting and well described. The reviewer recommends some issues to be added. 1) The author described the results of surgery vs endoscopic resection from Western studies. If any, suggestion of differences between data for surgery vs endoscopic resection from Eastern and Western would be helpful. 2) Recently, various virtual EMR education programs have been introduced. It would be better to be discussed briefly that these program affect EMR procedure improvement. 3) In addition resection techniques, recent studies regarding techniques to decrease recurrence rate of complex polyps would be better to be discussed briefly. Minor points

P.5, line 5, DSE is replaced with ESD. The author should give full name for all abbreviations in the main text. P.6, line 7, What does ESR mean?