

PEER-REVIEW REPORT

Name of journal: *World Journal of Gastrointestinal Surgery*

Manuscript NO: 77890

Title: Interventional radiology followed by endoscopic drainage for pancreatic fluid collections associated with high bleeding risk: Two case reports

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06109990

Position: Editorial Board

Academic degree: MBChB

Professional title: Academic Research, Full Professor, Senior Editor, Surgeon

Reviewer's Country/Territory: Iraq

Author's Country/Territory: China

Manuscript submission date: 2022-05-26

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-05-26 11:44

Reviewer performed review: 2022-05-27 16:20

Review time: 1 Day 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 Grade E: Do not publish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 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 type="checkbox"/> Minor revision <input checked="" 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 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

Dear Authors, Thank you for conducting this study entitled "Interventional radiology followed by endoscopic drainage for pancreatic fluid collections associated with high bleeding risk: Report of two cases" for possible publication in the esteemed journal "World Journal of Gastroenterology". The following comments need to be addressed to improve the presentation of the article: 1. Minor editing and language corrections are needed. 2. The title consists of 19 words. However, the maximum number of words allowed by the journal is 18. I suggest the following title: "Interventional radiology followed by endoscopic drainage for pancreatic fluid collections associated with high bleeding risk: Two cases report". 3. Abstract: The ages of the patients should be mentioned. 4. Please add another word to be 6 keywords as per journal style. 5. Core tip: a. It is better to replace the "gastro" with the "stomach". Please do the same change throughout the manuscript. b. Last line: I think it is better to add "in patients" before "with". 6. Introduction a. Please add the full term of the abbreviation (ESEG). b. This sentence "In two patients, lumen-metal apposing stents were successfully placed to drain PFCs under endoscopic ultrasound guidance during preoperative embolization of potential bleeding vessels." is confusing because this sentence does belong to your work or the work of other authors. Please clarify it. 7. Case presentation: We found that there is a mixing of the information about the diagnosis, treatment, and follow-up. Therefore, they need re-writing. 8. Discussion: last paragraph a. You mentioned only one limitation of the study while you said some limitations. Besides, a reference for it is necessary. 9. References: you missed adding the PMID and DOI in reference number 14. 10. Figures a. Figure 1: "perioperative" needs to be changed to "preoperative". b. Figure 2: 1. This

belongs to which patient. 2. You must add the EUS picture of the other patient. 3. Please remove the "OLYMPUS" from the picture. 4. Please add the word "white" before the word "arrow". c. Figure 3 1. This belongs to which patient. 2. You must add the angiogram picture of the other patient.

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Title: Interventional radiology followed by endoscopic drainage for pancreatic fluid collections associated with high bleeding risk: Two case reports

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06254416

Position: Peer Reviewer

Academic degree: MD

Professional title: Assistant Professor, Attending Doctor

Reviewer's Country/Territory: United States

Author's Country/Territory: China

Manuscript submission date: 2022-05-26

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Reviewer accepted review: 2022-05-27 13:20

Reviewer performed review: 2022-05-28 03:49

Review time: 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 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

I think this article provides useful information to interventional gastroenterologists, surgeons, and interventional radiologists who may encounter this rare, but difficult situation. I think the overall structure and content of the manuscript are appropriate. I have specific suggestions below: Case Summary -"Gastro varices" should be "Gastric varices" Introduction -ESEG is not introduced in full before abbreviating -"low invasiveness" could be reworded to read more easily Case Report The sections of Chief complaints, History of present illness, History of past illness, Personal and family history, Physical examination, Laboratory examinations, Imaging examinations, and Treatment all present the two patients in parallel. Most limited case series are presented with each case presented in its entirety, in series, one after the other. Outcome and Follow-Up -"mo" should be should be spelled out Discussion -is there a better word than "disturbing" in paragraph 2? -"Endovascular therapy" or "endovascular embolization" may be better terms than "interventional radiology" in paragraph 3 Conclusion -As in the discussion, "endovascular therapy" or "endovascular embolization" may be better terms than "interventional radiology."

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Title: Interventional radiology followed by endoscopic drainage for pancreatic fluid collections associated with high bleeding risk: Two case reports

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05630740

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: South Korea

Author's Country/Territory: China

Manuscript submission date: 2022-05-26

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-05-30 05:47

Reviewer performed review: 2022-05-30 06:47

Review time: 1 Hour

Scientific quality	<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
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 checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No



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Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No
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SPECIFIC COMMENTS TO AUTHORS

The paper is well organized and concisely written and I believe it adds to the current knowledge in the topic matter. However, as I have done the work (provided in yellow & red highlight), authors please seriously concede to the recommendations provided regarding grammatical errors. I have also made a suggestion in the latter part of the concluding sentence in the conclusion section. Finally, please use the appropriate check list PDF version accordingly and resubmit. The appropriate form is available on the following website [<https://www.care-statement.org/downloads>]. Provided that authors follow these recommendations explicitly, I recommend that this manuscript is worthy of and should be fully considered for publication.

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Title: Interventional radiology followed by endoscopic drainage for pancreatic fluid collections associated with high bleeding risk: Two case reports

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 00031302

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: United States

Author's Country/Territory: China

Manuscript submission date: 2022-05-26

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-05-27 14:14

Reviewer performed review: 2022-06-05 21:54

Review time: 9 Days and 7 Hours

Scientific quality	<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
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input checked="" 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 type="checkbox"/> Minor revision <input checked="" 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 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

I think that the 2 case reports are valuable to the readership of the journal so that physicians are aware that there are ways to get around the problem of intervening vessels when creating a cystgastrostomy. My main criticism is that the grammar interferes with the readability of the case reports. I will provide several examples below:

- 1) Abstract (Background): Instead of "puncture points next to multiple vessels" I would substitute with "intervening vessels".
- 2) Abstract (Case Summary): Instead of "gastro" would put "gastric".
- 3) EUS just needs to be abbreviated once in the abstract.
- 4) Abstract (Case Summary): Interventional "with embolization" was recommended... Would add the words in quotations.
- 5) Abstract (Core tip): "is" should be substituted for "has". The second sentence additionally needs to be rewritten.
- 6) Introduction: ESEG needs to be written out prior to abbreviating. These are just several examples of errors found in the abstract and beginning of the intro. Once the authors have rereviewed and corrected the grammatical errors throughout the case report, it will flow better and will be more readable.

RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Title: Interventional radiology followed by endoscopic drainage for pancreatic fluid collections associated with high bleeding risk: Two case reports

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06109990

Position: Editorial Board

Academic degree: MBChB

Professional title: Academic Research, Full Professor, Senior Editor, Surgeon

Reviewer's Country/Territory: Iraq

Author's Country/Territory: China

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Reviewer chosen by: Jia-Ping Yan

Reviewer accepted review: 2022-06-29 09:41

Reviewer performed review: 2022-06-29 20:56

Review time: 11 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 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 checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Peer-reviewer	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous



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statements

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

SPECIFIC COMMENTS TO AUTHORS

Dear Authors, Thank you for revising this article entitled "Interventional radiology followed by endoscopic drainage for pancreatic fluid collections associated with high bleeding risk: Two cases report" for possible publication in the esteemed journal "World Journal of Gastrointestinal Surgery". You made the required changes. I have only one comment; you must add the CT scan findings in the legend of the Figure 1 to be withstand alone. Congratulations for your nice job.