

#### PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Surgery

Manuscript NO: 80343

Title: Impact of endoscopic ultrasound-guided radiofrequency ablation in managing

pancreatic malignancy

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06283260 Position: Peer Reviewer Academic degree: MD

**Professional title:** Doctor

Reviewer's Country/Territory: Reviewer\_Country

Author's Country/Territory: Indonesia

Manuscript submission date: 2022-09-23

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-09-23 18:37

Reviewer performed review: 2022-09-23 18:39

Review time: 1 Hour

Scientific quality	[ ] Grade A: Excellent [Y] Grade B: Very good [ ] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Language quality	[ ] Grade A: Priority publishing [ Y] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	[ ] Accept (High priority) [ ] Accept (General priority) [ Y] Minor revision [ ] Major revision [ ] Rejection
Re-review	[ ]Yes [Y]No



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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

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

#### SPECIFIC COMMENTS TO AUTHORS

Good study minor language corrections needed



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Peer-review model: Single blind

Reviewer's code: 05655782 Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Doctor, Professor

Reviewer's Country/Territory: China

Author's Country/Territory: Indonesia

Manuscript submission date: 2022-09-23

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-09-24 09:53

Reviewer performed review: 2022-09-25 01:49

**Review time:** 15 Hours

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Language quality	[ Y] Grade A: Priority publishing [ ] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	[ ] Accept (High priority) [Y] Accept (General priority) [ ] Minor revision [ ] Major revision [ ] Rejection
Re-review	[Y]Yes [ ]No



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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

statements

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

#### SPECIFIC COMMENTS TO AUTHORS

The author discusses the role of endoscopic ultrasound-guided radiofrequency ablation in pancreatic space-occupying lesions. It is recommended to appropriately increase endoscopic ultrasound and the knowledge of radiofrequency ablation in the introduction section. This manuscript can be accepted for publication.



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Title: Impact of endoscopic ultrasound-guided radiofrequency ablation in managing

pancreatic malignancy

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

**Reviewer's code:** 01467632 **Position:** Editorial Board

Academic degree: FASGE, MD

Professional title: Adjunct Professor, Director, Doctor

Reviewer's Country/Territory: Italy

Author's Country/Territory: Indonesia

Manuscript submission date: 2022-09-23

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-09-24 09:58

Reviewer performed review: 2022-09-29 14:17

**Review time:** 5 Days and 4 Hours

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [ ] Grade C: Good [ Y] Grade D: Fair [ ] Grade E: Do not publish
Language quality	[ ] Grade A: Priority publishing [ Y] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	[ ] Accept (High priority) [ ] Accept (General priority) [ ] Minor revision [ Y] Major revision [ ] Rejection
Re-review	[Y]Yes [ ]No



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Peer-reviewer

Peer-Review: [Y] Anonymous [ ] Onymous

statements

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

#### SPECIFIC COMMENTS TO AUTHORS

The object of the minireview is very interesting and topical in pancreatic lesion. However some changes are needed in order to better explain the use of radiofrequency ablation. In particular: In Introduction session you state that Whipple operation mortality in 4.1%. I imagine that this data regards high-volume centers. Could you specify it in the text? In the last part of the introduction you state that EUSRFA is used to treat pancreatic masses. I believe that is fundamental to specify that RFA is used to treat pancreatic lesions in a multidisciplinary context and evaluation. Please could you insert it in the text? In the starting part of "surgical treatment in pancreatic malignancy" paragraph you state that adjuvant chemotherapy is usually becoming the standard treatment of pancreatic cancer. Did you mean neo-adjuvant treatment? Please specify. In the paragraph "radiofrequency ablation treatment and its role in pancreatic malignancy you just mentioned that radiofrequency ablation is a "thermal" therapy. I understand that this is a minireview but maybe a short explanation of method, techniques and devices used is necessary for not-technical about the issue. For example there are different ablation methods (following temperature increase or impedance) and probes (surgical, endoscopic with catheters or needles). Moreover a brief explanation about physical principles is needed. Please, can you better specify? In "innovation on EUS-.RFA in pancreatic malignancy" you have discussed the specific use of the system with EUS. Please, better explain this system (needle probe with electrode on the tip, working with the generator following impedance, peristaltic pump for needle perfusion with chilled solution,...). Moreover, you cited few articles about the issue. Other experiences have been done and have been reported in literature, in particular more



recent experiences. Please, verify the completeness of reported references and add new bibliographic voices in the text (both regarding NET or PDAC).



### RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: World Journal of Gastrointestinal Surgery

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Title: Impact of endoscopic ultrasound-guided radiofrequency ablation in managing

pancreatic malignancy

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

**Reviewer's code:** 01467632 **Position:** Editorial Board

Academic degree: FASGE, MD

Professional title: Adjunct Professor, Director, Doctor

Reviewer's Country/Territory: Italy

Author's Country/Territory: Indonesia

Manuscript submission date: 2022-09-23

Reviewer chosen by: Han Zhang

Reviewer accepted review: 2022-11-10 08:58

Reviewer performed review: 2022-11-10 10:05

Review time: 1 Hour

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Language quality	[ Y] Grade A: Priority publishing [ ] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	[ ] Accept (High priority) [ ] Accept (General priority) [ Y] Minor revision [ ] Major revision [ ] Rejection
Peer-reviewer	Peer-Review: [ Y] Anonymous [ ] Onymous



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statements

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

#### SPECIFIC COMMENTS TO AUTHORS

The object of the minireview is very interesting and topical in pancreatic lesion. However some changes are needed in order to better explain the use of radiofrequency ablation. In particular: In Introduction session you state that Whipple operation mortality in 4.1%. I imagine that this data regards high-volume centers. Could you specify it in the text? --> Issue has been solved as requested. In the last part of the introduction you state that EUS RFA is used to treat pancreatic masses. I believe that is fundamental to specify that RFA is used to treat pancreatic lesions in a multidisciplinary context and evaluation. Please could you insert it in the text? --> Issue has been solved In the starting part of "surgical treatment in pancreatic malignancy" paragraph you state that adjuvant chemotherapy is usually becoming the standard treatment of pancreatic cancer. Did you mean neo-adjuvant treatment? Please specify. --> Issue has been solved as requested. In the paragraph "radiofrequency ablation treatment and its role in pancreatic malignancy you just mentioned that radiofrequency ablation is a "thermal" therapy. I understand that this is a minireview but maybe a short explanation of method, techniques and devices used is necessary for not-technical about the issue. For example there are different ablation methods (following temperature increase or impedance) and probes (surgical, endoscopic with catheters or needles). Moreover a brief explanation about physical principles is needed. Please, can you better specify? --> You stated: "system using the electrical current from a generator with monopolar electrode" added usually with monopolar electrode please, because bipolar pancreatic probes not usable under endoscopic control exist. Please, remove "The cooling system using water-based with cooled needle (cool-tip system). The electrode types are single internally cooled electrode, cluster internal cooled electrode system, and



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variations (StarBurst from RITA and LeVeen from Boston Scientific)" because is related only to the endoscopic pancreatic probe and the generator is not correct. In this session you explain every type of probes (also surgical) and this is not correct. In "innovation on EUS-.RFA in pancreatic malignancy" you have discussed the specific use of the system with EUS. Please, better explain this system (needle probe with electrode on the tip, working with the generator following impedance, peristaltic pump for needle perfusion with chilled solution,...). --> Please, insert here the EUS-system description previous reported removing the specific name of the generator which is incorrect. Moreover, you cited few articles about the issue. Other experiences have been done and have been reported in literature, in particular more recent experiences. Please, verify the completeness of reported references and add new bibliographic voices in the text (both regarding NET or PDAC). --> Some references have been missed for example: Rossi G et al. Endoscopic ultrasound radiofrequency ablation of pancreatic insulinoma in elderly patients: Three case reports. World J Clin Cases 2022. In reference 29 you reported in the text the name of the author "Nucci", please modify with the correct surname "de Nucci et al."