

## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Gastrointestinal Surgery*

**Manuscript NO:** 81835

**Title:** Clinical features of acute esophageal mucosal lesions and reflux esophagitis Los Angeles classification grade D: a retrospective study

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

**Peer-review model:** Single blind

**Reviewer's code:** 01550502

**Position:** Editorial Board

**Academic degree:** MD

**Professional title:** Associate Professor

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

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

**Manuscript submission date:** 2022-11-25

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-12-04 14:02

**Reviewer performed review:** 2022-12-15 12:13

**Review time:** 10 Days and 22 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 Grade E: Do not publish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 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

<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

This retrospective study is aimed at comparing endoscopic and pathophysiologic mechanisms of two conditions, i.e. acute esophageal necrosis (i.e. acute esophageal mucosal lesions) and grade D erosive esophagitis. It is already known that these endoscopic findings actually reflect, in the vast majority of cases, two different conditions. Acute esophageal necrosis (AEN), commonly referred to as “black esophagus”, is a rare clinical entity arising from a combination of ischemic insult seen in hemodynamic compromise and low-flow states, corrosive injury from gastric contents in the setting of esophago-gastroparesis and gastric outlet obstruction, and decreased function of mucosal barrier systems - reparative mechanisms -present in malnourished and debilitated physical states. AEN may arise in the setting of multiorgan dysfunction, hypoperfusion, vasculopathy, sepsis, diabetic ketoacidosis, alcohol intoxication, gastric volvulus, traumatic transection of the thoracic aorta, thromboembolic phenomena, and malignancy. On the other hand, grade D erosive esophagitis is the most severe stage of esophageal inflammation due to reflux disease. Given these different underlying mechanisms, results from the present study seem not to provide brand new data and are in line with those currently available. Some other issues need to be pointed out: •

Inclusion criteria: patients with systemic sclerosis, esophageal tuberculosis and esophageal pemphigus should be excluded • Was concomitant anti-coagulant therapy carefully assessed? This is relevant being an effective protective factor against arise of AEN and concomitant favouring factor of bleeding. Patients with cirrhosis and previous variceal band ligation should be excluded • Gastric and duodenal ulcers were more frequent in patients with AEML but it is not clear length, duration and



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adherence to concomitant PPI treatment in all patients • Unexpectedly, no esophageal stenosis followed healing of grade D esophagitis: how many patients underwent a 6-months follow-up? • Please consider to carefully revise the entire manuscript for syntax and several typos

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**Peer-review model:** Single blind

**Reviewer's code:** 04638942

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

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

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

**Manuscript submission date:** 2022-11-25

**Reviewer chosen by:** Dong-Mei Wang

**Reviewer accepted review:** 2023-01-11 01:05

**Reviewer performed review:** 2023-01-13 10:44

**Review time:** 2 Days and 9 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
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation

<b>Scientific significance of the conclusion in this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
<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 checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" 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

The authors compared the clinical features of acute esophageal mucosal lesions (AEMs, n=105) and LA-D reflux esophagitis (n=48) using a single-center retrospective study. The results showed significantly different results, indicating that the two diseases may be attributed to different pathologies. The results were very helpful for clinical practice, and it is recommended to supplement the etiology, such as the proportion of eosinophilic esophagitis, acute reflux, drug-related, etc. in AEMs patients.