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# PEER-REVIEW REPORT

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

**Manuscript NO:** 88745

**Title:** Endoscopic-ultrasound-guided biliary drainage with placement of electrocautery-enhanced lumen-apposing metal stent for palliation of malignant biliary obstruction: Updated meta-analysis

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

**Peer-review model:** Single blind

**Reviewer's code:** 03354704
**Position:** Peer Reviewer
**Academic degree:** N/A
**Professional title:** N/A
**Reviewer's Country/Territory:** Canada
**Author's Country/Territory:** China

**Manuscript submission date:** 2023-10-07

**Reviewer chosen by:** Jia-Ru Fan

**Reviewer accepted review:** 2023-12-02 03:46

**Reviewer performed review:** 2023-12-04 01:21

**Review time:** 1 Day and 21 Hours

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|---|---|
| **Scientific quality** | [ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good<br>[ ] Grade D: Fair [ ] Grade E: Do not publish |
| **Novelty of this manuscript** | [ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair<br>[ ] Grade D: No novelty |

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| **Creativity or innovation of this manuscript** | [ ] Grade A: Excellent [ ] Grade B: Good [Y] Grade C: Fair [ ] Grade D: No creativity or innovation |
| **Scientific significance of the conclusion in this manuscript** | [ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No scientific significance |
| **Language quality** | [ ] Grade A: Priority publishing [ ] Grade B: Minor language polishing [Y] 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 |
| **Peer-reviewer statements** | Peer-Review: [Y] Anonymous [ ] Onymous |
| | Conflicts-of-Interest: [ ] Yes [Y] No |

**SPECIFIC COMMENTS TO AUTHORS**

Summary The authors report on "EUS-guided biliary drainage with placement of electrocautery-enhanced (ECE) lumen-apposing metal stent (LAMS) for palliation of malignant biliary obstruction. This is an updated meta-analysis of their previous paper (ref. 16) from 2021. That paper involved 6 studies with 270 patients whereas the current manuscript is statistically better-powered (14 studies with 620 patients). The findings reaffirm the utility of ECE-LAMS in relieving biliary obstruction when ERCP is not possible. Comments 1. The last 2 decades have seen significant improvements in techniques for biliary drainage and this remains an engaging topic for gastroenterology and hepatology. For this reason, I think that this will continue to drive interest with the readership. That said, the only major difference between the 2021 and current study is the statistical power derived from the larger numbers. It would be more compelling to have further clinical trials in this field to build up an even larger database for future

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meta-analyses. 2.There are many ‘typos’ and grammar issues in the manuscript e.g. the last sentence in the Abstract. They should be corrected to improve the flow and readability of the manuscript.