

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Oncology

ESPS manuscript NO: 25598

Title: Exocrine Pancreatic Dysfunction in Patients With Septic Shock: A Literature Review

Reviewer's code: 00001832

Reviewer's country: Germany

Science editor: Ze-Mao Gong

Date sent for review: 2016-03-18 11:48

Date reviewed: 2016-03-19 02:49

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input checked="" type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input checked="" type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

The manuscript by Chaari and co-workers reviews the literature with respect to septic shock and exocrine pancreatic function. The manuscript is generally well written, and the topic is of interest. There are, however, some major concerns with the present analysis. It would be important to describe how the review of the literature was carried out, e.g. search criteria, databases, time period and so on. Even if the review is not a systematic one, this would still be important information. I am not convinced that increased amylase or lipase levels point to exocrine dysfunction. Rather, they point to organ damage. I would understand dysfunction as impaired production of enzymes. This needs to be clarified, otherwise the review is about pancreatic injury during sepsis. Actually that is what the authors are writing about. There are many statements that are not supported by references, e.g. "oxygen delivery to the pancreatic cells is significantly decreased" or "considerable increase of their oxygen requirement" and many others. The paragraphs speculating about mechanisms describe connected principles. For example, changes in perfusion, can result in hypoxia, can result in apoptosis, can also result in oxidative stress. It seems strange to discuss these points as 'exclusive'



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separate mechanisms.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Oncology

ESPS manuscript NO: 25598

Title: Exocrine Pancreatic Dysfunction in Patients With Septic Shock: A Literature Review

Reviewer's code: 03257773

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Science editor: Ze-Mao Gong

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

The topic of the review is relevant, as signs of pancreatic injury is quite common in intensive care patients, and may be mistaken for acute pancreatitis. The manuscript is rather well composed. It is short and to the point. There are, however, some issues: 1. The use of the term "pancreatic dysfunction" is problematic, as the presence of pancreatic insufficiency (or dysfunction) is questionable. Increasing levels of amylase and lipase are signs of pancreatic injury, and not dysfunction. Hence, "pancreatic injury" is probably a better term. 2. There is some need for language polishing. There are some language inconsistencies, for example mixing of physiopathology and pathophysiology. 3. Chapter 1. Introduction: The worsening of prognosis is described in the case of multi organ failure. It is quantified in the case of renal failure, but not in the case of liver, lung or gut ischemia. Are there estimates on how much failure in these organ systems, and multi organ failure as such aggravates the prognosis? 4. Chapter 4. Clinical relevance of exocrine pancreatic dysfunction: Clinical chemistry results seem to be of little help in deciding whether the critically ill patient should undergo imaging evaluation for acute pancreatitis. The conclusion is that clinical features should



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decide whether to go further in such an evaluation. Are there data on which clinical features should make the patient undergo imaging for pancreatitis?

ESPS PEER-REVIEW REPORT

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Title: Exocrine Pancreatic Dysfunction in Patients With Septic Shock: A Literature Review

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
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COMMENTS TO AUTHORS

Exocrine pancreatic dysfunction is common in patients suffering from septic shock. This is the first article reviewing exocrine pancreatic dysfunction in septic shock. After a broad literature review, the author found that increase in levels of pancreatic enzymes does not significantly affect the outcome and thus, disturbed serum pancreatic enzymes without clinical evidence of acute pancreatitis should not trigger any specific therapy. Although the manuscript being simply written, it is a nicely written paper with few language errors. I agree that it is a useful contribution to literature. Major Compulsory Revisions - 1. In my opinion, "Abstract section" could be improved and should include the conclusions, such as "exocrine pancreatic dysfunction does not significantly affect the outcome in septic shock patients". 2. References should not include the articles published twenty even thirty years ago.