

## PEER-REVIEW REPORT

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

**Manuscript NO:** 37981

**Title:** Diagnosis of intraductal papillary mucinous neoplasm using endoscopic ultrasound guided microbiopsies: A case report

**Reviewer's code:** 02954022

**Reviewer's country:** United States

**Science editor:** Li-Jun Cui

**Date sent for review:** 2018-03-23

**Date reviewed:** 2018-03-23

**Review time:** 9 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input checked="" type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input checked="" type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input type="checkbox"/> No

### SPECIFIC COMMENTS TO AUTHORS

This is a brief case report describing the utilization of novel forceps to obtain biopsies from pancreatic cystic lesions. The case demonstrates the benefit of obtaining a bx sample to confirm a diagnosis of IPMN. The case report fails to describe other



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competitive technologies including confocal laser endomicroscopy, risk of bleeding associated with a forceps bx in IPMNs, and possible management of bleeding in these situations. While NGS is supposed to yield positive results in a bx sample, the authors would need to mention as to why it was not suggestive of underlying pathology. The authors would need to also address technical difficulties of using a 19g needle with a loaded Moray forceps and the difficulty with obtaining samples from lesions in the uncinate process. Further the associated risks of pancreatitis with a 19g (whether increases vs. no risk) will need to be addressed. The report is otherwise useful in showing continued use of a novel bx forceps in pancreatic cystic lesions.

#### **INITIAL REVIEW OF THE MANUSCRIPT**

##### ***Google Search:***

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ [Y] No

##### ***BPG Search:***

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ [Y] No

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

**Manuscript NO:** 37981

**Title:** Diagnosis of intraductal papillary mucinous neoplasm using endoscopic ultrasound guided microbiopsies: A case report

**Reviewer's code:** 00055108

**Reviewer's country:** Norway

**Science editor:** Li-Jun Cui

**Date sent for review:** 2018-03-23

**Date reviewed:** 2018-03-27

**Review time:** 4 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
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<input checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
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			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input type="checkbox"/> No

### SPECIFIC COMMENTS TO AUTHORS

It's a OK presentation and update. I suggests that the author finds another way to describe the puncture route - "transgastrically" is not a precise description. Please provide arrows on figure 1 to indicate location of the needle and area of interest.



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