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PEER-REVIEW REPORT

Name of journal: World Journal of Gastrointestinal Endoscopy

Manuscript NO: 67111

Title: Gastrointestinal hemorrhage in the setting of gastrointestinal cancer: Anatomical

prevalence, predictors, and interventions

Reviewer's code: 05919108

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: United States

Manuscript submission date: 2021-04-21

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-04-22 00:55

Reviewer performed review: 2021-04-29 08:34

Review time: 7 Days and 7 Hours

Scientific quality	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish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	[]Yes [Y]No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No



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SPECIFIC COMMENTS TO AUTHORS

This retrospective study, based on the National Inpatient Sample database, analyzed the prevalence, predictors, and interventions of gastrointestinal hemorrhage in the setting of gastrointestinal cancer. It is an interesting topic as GIH is a common but intractable clinical manifestation of GIC. With good study design and appropriate statistical methods, this study provides a comprehensive assessment of GI hemorrhage in GI cancer patients. Their results summarized the features of GIH in the setting of GIC, which are helpful in clinical practice. Their results also revealed that the use of endoscopy could reduce the mortality in these patients compared with surgery, trans-arterial embolization and radiation therapy. This highlighted the necessary to use endoscopy in patients with GIH and GIC, and may give inspriation to further researchers. These findings are well discussed and suitably extended. Although several important factors are not discussed (such as the amount of bleeding, the stage and grade of tumor, the timing of endoscopy), as the author states, these factors are not available in this database. Nonetheless, this is a paper with high quality and good grammar.